2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 01, 2008 8:00 am **Secretary of State DOCUMENT # P97000099433** 1. Entity Name 02-01-2008 90028 027 ***150.00 12880 BUILDING CORP. Principal Place of Business Mailing Address 12800 N.W. 7TH AVENUE 12800 N.W. 7TH AVENUE NORTH MIAMI, FL 33168 NORTH MIAMI, FL 33168 2. Principal Place of Business - No P.O. Box # 3. Mailing Address PO BOX 530136 1351 NE 102ND ST Suite, Apt. #, etc. 01232008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For MIAMI SHORES 65-0797940 Not Applicable ^{Zip} 33153-01**%** \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARBIN, EVAN R ESQ. Street Address (P.O. Box Number is Not Acceptable) **48 EAST FLAGLER STREET** PENTHOUSE 104 MIAMI, FL 33131 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition RUSHING, DERK NAME NAME STREET ADDRESS 12800 N.W. 7TH AVENUE STREET ADDRESS CITY-ST-ZIP NORTH MIAMI, FL 33168 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition RUSHING, MIRIAM NAME NAME STREET ADDRESS 12800 N.W. 7TH AVENUE STREET ADDRESS CITY-ST-ZIP NORTH MIAMI, FL 33168 CITY-ST-ZIP Delete Change Addition | TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED