## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## FILED May 05, 2008 08:00 Al Secretary of State

<b>IMFNT</b>	# P97	በበበ1	<b>05128</b>
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1. Entity Name

PLAZA PROPERTY DEVELOPMENT, INC.



Principal Place of Business

1655 DREXEL AVENUE

SUITE 209 MIAMI BEACH, FL 33139 Mailing Address

1655 DREXEL AVENUE SUITE 209

MIAMI BEACH, FL 33139



04222008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0814388 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

ROSENBERG, JEFFREY 1655 DREXEL AVENUE SUITE 209 MIAMI BEACH, FL 33139

SIGNATURE: 5

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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 reinstatury)  DATE								
		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000947312			
10.	OFFICERS AND DIREC	CTORS			<u> </u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS ROSENBERG, JEFFREY 1655 DREXEL AVENUE, SUITE 209 MIAMI BEACH, FL 33139		, ,					
NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>*</sup>	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filling 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 faccurate 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 a process, with all other like empowered.								

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR