

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000001692

Entity Name: NORMANDY BAY CORP.

FILED  
Apr 18, 2008  
Secretary of State

## Current Principal Place of Business:

500 NE 185 ST  
MIAMI, FL 33179 US

## New Principal Place of Business:

## Current Mailing Address:

900 BAY DRIVE PH 1  
MIAMI BEACH, FL 33141 US

## New Mailing Address:

FEI Number: 65-0803892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVINSON, JUDITH  
900 BAY DR PH 1  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: LEVINSON, STEVEN  
Address: 900 BAY DRIVE PH 1  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: VP ( ) Delete  
Name: LEVINSON, TAL  
Address: 500 NE 185 STREET  
City-St-Zip: MIAMI, FL 33179 US

Title: SECT ( ) Delete  
Name: LEVINSON, TAL  
Address: 500 NE 185 STREET  
City-St-Zip: MIAMI, FL 33179

Title: TREA ( ) Delete  
Name: LEVINSON, TAL  
Address: 500 NE 185 STREET  
City-St-Zip: MIAMI, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: LEVINSON, TAL  
Address: 500 NE 185 ST  
City-St-Zip: MIAMI, FL 33179 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SECT (X) Change ( ) Addition  
Name: LEVINSON, RONEY  
Address: 615 SOUTH SHORE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: TREA (X) Change ( ) Addition  
Name: LEVINSON, ROY  
Address: 615 SOUTH SHORE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAL LEVINSON

PRES

04/18/2008

Electronic Signature of Signing Officer or Director

Date