2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P98000052487

HOLLYWOOD ATLANTIC REAL ESTATE GROUP, INC.

FILED Apr 28, 2005 8:00 am Secretary of State

04-28-2005 90164 050 ***150.00

4/25/05

Date

(954) 492-1980

Daytime Phone #

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Principal Place of Business 2101 WEST COMMERCIAL BLVD. SUITE 4100 FT LAUDERDALE, FL 33309				Mailing Address 2101 WEST COMMERCIAL BLVD. SUITE 4100 FT LAUDERDALE, FL 33309								
2. Principal Place of Business 2101 W. Commercial Blvd.				3. Mailing Address 2101 W. Commercial Blvd.								
Suite, Apt. #, etc. Suite 2800				Suite, Apt. #, etc. Suite 2800				03112005	Chg-P	CR2	E034 (10/03)	
City & State Ft. Lauderdale, FL				City & State Fort Lauder	FL		4. FEI Numb 65-084			<u> </u>	oplied For at Applicable	
Zip Country US				Zip 33309	Cour	•	-	5. Certificate	of Status Desired		\$8.75 Additional Fee Required	
6. Name and Address of Current F				gistered Agent	7. Name and Address of New Registered Agent							
FORMAN, ROBERT S ESQ. 2101 WEST COMMERCIAL BLVD. SUITE 4100								P.O. Box Numb t Commen	cman er is Not Acceptat ccial Blv	ble)		
FT LAUDERDALE, FL 33309				,		Sui	uite 2800 .					
			<u>/</u>	City Fort Lauderdale				F	_ 1 3330			
the obligat	Signature, typed	or printed name of registored	d agent and	9. Election Car	Rob (NOTE: Register mpaign Fina	ert S. ed Agent signel	For	-	th, in the State of I	4/25	/05	and accept
10.	ay 1, 200	5 Fee will be \$5		<u></u>	11.		,,,,,		CHANGES TO O	EFICERS A	ND DIRECTOR	S INI 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2101 W C	KENNETH L COMMERICAL BLV UDERDALE, FL 3	/D+#446	☐ Delete	TITT NA/ STR	LE .	Sı	# s			Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1000		☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete					`		Change	Additlor
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	☐ Delete							Change	Addition
THRE NAME STREET ADDRESS CHY-ST-ZIP				☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is the 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 it changed, or on an attachment with an address, with all other rike empowered.

Kenneth L. Shimm, President

SIGNATURE AND PITED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: