FILED

2001 UNIFORM BUSINESS REPORT (UB

DOCUMENT #

Aug 08, 2001 8:00 am Secretary of State P99000022845 1. Entity Name MAP PROPERTIES, INC. 08-08-2001 90004 019 ***150.00 Principal Place of Business Mailing Address 13615 S. DIXIE HIGHWAY 13615 S. DIXIE HIGHWAY SUITE 114-402 SUITE 114-402 MIAMI FL 33176 MIAMI FL 33176 2. Principal Place of Business Mailing Address AVE. CT. 9315 SW 123 AVE. 315 9W 123 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0909133 IAMI FLA mitm 1 Not Applicable Country Zip Zip \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OML, PHIL R 1380 N. 15 STREET HOMESTEAD FL 33130 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition (5/01 OMI, PHIL R NAME NAME CR2E034 STREET ADDRESS 1380 N. 15 STREET STREET ADDRESS CITY-ST-ZIP HOMESTEAD FL 33130 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MANASH, MICHAEL NAME STREET ADDRESS STREET ADDRESS 11280 SW 108 CT CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SWETT ROBERT NAME NAME 9315.BW. 123 AVE. CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MHMI FL. 33186 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing 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 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 fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MAP Properties

13615 South Dixie Highway Suite 114-402 Miami, Florida 33177



ATTACHMENT ADSHOUST

P99000022845

July 30, 2001

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Dear Sir or Madam:

Please accept our payment of \$150.00 to renew our corporation for 2001. The first notice we have received this year is the late notice for payments not received by June, I am sending this fee immediately.

Sincerely,

Phil Omi President