2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # S00074

1. Entity Name
PURPLE ISLAND PROPERTIES, INC.

FILED
05 NOV -7 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
3390-G SW 15TH STREET DEERFIELD BEACH, FL 33442 US	3390-G SW 15TH STREET DEERFIELD BEACH, FL 33442 US

08012005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0231980 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CIMAGLIA, LOUIS JR. 3390-G SW 15TH STREET DEERFIELD BEACH, FL 33442	Name: Anthony E. Cimaglia Sr. Street Address (P.O. Box Number is Not Acceptable): 3390-G SW 15th Street City: Deerfield Beach FL Zip Code: 33442

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: See Attachment Anthony E. Cimaglia Sr. 8/1/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTSD CIMAGLIA, LOUIS JR. 1200 NW 87TH AVE. #309 CORAL SPRINGS, FL 33071	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Anthony E. Cimaglia Sr. 9981 Equus Circle Boynton Beach, FL 33437	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T/D Jane Cimaglia 9981 Equus Circle Boynton Beach, FL 33437	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FLINSTATEMENT 05 800061452728 11/16/05--01003--002 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T. Roberts NOV 0 9 2005	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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.

SIGNATURE: Anthony E. Cimaglia Sr. 954-913-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Purple Island Properties Inc.

2. The principal office address: 3390-G SW 15th Street
Deerfield Beach, FL 33442

3. The mailing address (if different): Same As Above

4. Date of incorporation/qualification: 8/28/90 Document number: S00074

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Louis Cimaglia Jr.
3390-G SW 15th Street
Deerfield Beach, FL 33442

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Anthony E. Cimaglia Sr.
9981 Equus Cir
(P.O. Box NOT acceptable)
Boynton Bch, Fl. 33437

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director) — Anthony Cimaglia Sr., President (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent) — 8/1/05 (Date)

If signing on behalf of an entity:

Purple Island Properties Inc.
(Typed or Printed Name)

*** * * FILING FEE: $35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Louis Cimaglia Jr. (Name of Registered Agent)

hereby resigns as Registered Agent for Purple Island Properties Inc. (Name of Corporation),

S00074 (Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Louis Cimaglia Jr.
(Signature of Resigning Agent)

Louis Cimaglia Jr.

If signing on behalf of an entity:

Purple Island Properties Inc.
(Typed or Printed Name)

President and Director
(Capacity)

Fee for filing this document:
$87.50 - Active corporation
$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, Louis Cimaglia Jr., hereby resign as Director, President, Secretary and Treasurer
(Title)

of Purple Island Properties Inc.,
(Name of Corporation)

S00074, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Louis Cimaglia Jr.
(Signature of resigning officer/director)

Louis Cimaglia Jr.

FILING FEE IS $35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314