

**2005 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

DOCUMENT # S00074 1. Entity Name PURPLE ISLAND PROPERTIES, INC.			
Principal Place of Business 3390-G SW 15TH STREET DEERFIELD BEACH, FL 33442 US		Mailing Address 3390-G SW 15TH STREET DEERFIELD BEACH, FL 33442 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent CIMAGLIA, LOUIS JR. 3390-G SW 15TH STREET DEERFIELD BEACH, FL 33442		7. Name and Address of New Registered Agent 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: <u><i>See Attached</i></u> 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 ☐ \$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. ☒ Change ☒ Addition 9981 Equus Circle Boynton Beach, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D Jane Cimaglia ☒ Change ☒ Addition 9981 Equus Circle Boynton Beach, FL 33437
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	☐ 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	☐ 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: <u><i>Anthony E. Cimaglia Sr.</i></u>		Anthony E. Cimaglia Sr. 954-913-3000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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



08012005 Chg-P CR2E034 (10/03)

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

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

REINSTATEMENT

300061452728
11/16/05--01003--002 **\$61.25

T. Roberts NOV 09 2005

**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.

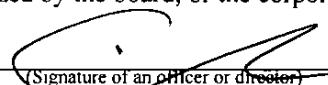
9981 Equus Cir

(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.

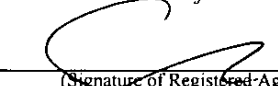
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(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.



(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**

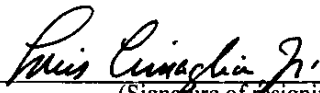
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

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.



(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