2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S00074

Entity Name: PURPLE ISLAND PROPERTIES, INC.

FILED May 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3390-G SW 15TH STREET 82229 OVERSEAS HWY.

DEERFIELD BEACH, FL 33442 US UNIT #1

ISLAMORADA, FL 33036 US

Current Mailing Address: New Mailing Address:

3390-G SW 15TH STREET 133 MILANO DRIVE

DEERFIELD BEACH, FL 33442 US ISLAMORADA, FL 33036 US

FEI Number: 65-0231980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CIMAGLIA, ANTHONY E CIMAGLIA, ANTHONY E 3390-G SW 15TH STREET 133 MILANO DRIVE

DEERFIELD BEACH, FL 33442 US ISLAMORADA, FL 33036 US

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: ANTHONY E. CIMAGLIA, SR. 05/23/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 T (X) Change () Addition

 Name:
 CIMAGLIA, ANTHONY E SR.
 Name:
 CIMAGLIA, ANTHONY E SR.

 Address:
 9981 EQUUS CIRCLE
 Address:
 133 MILANO DRIVE

 City-St-Zip:
 BOYNTON BEACH, FL 33437
 City-St-Zip:
 ISLAMORADA, FL 33036

Title: STD () Delete Title: S (X) Change () Addition Name: CIMAGLIA, JANE Name: CIMAGLIA, JANE

Name:CIMAGLIA, JANEName:CIMAGLIA, JANEAddress:9981 EQUUS CIRCLEAddress:133 MILANO DRIVECity-St-Zip:BOYNTON BEACH, FL 33437City-St-Zip:ISLAMORADA, FL 33036

Title: () Delete Title: PD () Change (X) Addition

 Name:
 Name:
 HANNAN, SANDRA M

 Address:
 Address:
 6366 CASABELLA LANE

 City-St-Zip:
 City-St-Zip:
 BOCA RATO N, FL 33433

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: JANE CIMAGLIA S 05/23/2007