Leich Name MARGATE PROPERTIES, INC.      Margate PROPERTIES, INC.      Mailing Address P.O. BOX 241 COLLINGSWOOD, NI 08108      DO NOT WRITE IN THIS SPACE      Of 102005 No Chg-P CR2E034 (10/03)      Leich Number 22-3078612     No Chg-P CR2E034 (10/03)      Leich Number 22-3078612     So Chg-P CR2E034 (10/03)      Leich Number 22-3078612     DO NOT WRITE IN THIS SPACE      So Chg-P CR2E034 (10/03)      Leich Number 22-3078612     DO NOT WRITE IN THIS SPACE      DO NOT WRITE IN THIS     DO NOT WRITE I	)0 AN	FILED Jan 13, 2005 08:00	N	2005 FOR PROFIT CORPORATION ANNUAL REPORT				
P.O. BOX 241 COLLINGSWOOD, NJ 09108       P.O. BOX 241 COLLINGSWOOD, NJ 09108         DO NOT WRITE IN THIS SPACE       D1102005         No Chy-P       CR2E034 (10/09)         4. FEI Number 22-3078812       No. 7         8. Name and Address of Current Registered Agent       No. 7         ANDREW, PEARL 19667 NE 3GTH CT TURNBERRY ISES APT 19A N MIAMI BEACH, FL 33180       DO NOT WRITE IN THIS SPACE         8. The above named entry 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, an the obligations of registered agent.         SIGNATURE       DO NOT WRITE fills statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent.         SIGNATURE       Proving 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, an the obligations of registered agent.         SIGNATURE       Proving submits this statement for the purpose of changing its registered dollar or registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent.         SIGNATURE       DO NOT WRITE         Proving 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, an the obligations of registered agent.         SIGNATURE       D         Business       O	tate	Secretary of Sta		r		me	1. Entity Na	
01102005 No Chg-P CR2E034 (10/03)         01102005 No Chg-P CR2E034 (10/03)         4 Appling the statement of the purpose of changing its registered Agent         ANDREW, PEARL.         19667 NE 36TH CT         TURNBERRY ISLE 5 APT 19A         N MIAMI BEACH, FL 33180         BOD NOT WRITE IN THIS SPACE         COLSPANE APT 19A         N MIAMI BEACH, FL 33180         Colspan="2">DO NOT WRITE IN THIS SPACE         SIGNATURE         Biguins, used or primed name of neglenered agent and the it aptitable         PORT Registered Agent agent and the it aptitable         PORT Registered agent, or both, in the State of Florida. 1 am familiar with, an the obligations of registered agent, or both, in the State of Florida. 1 am familiar with, an the obligations of registered agent.         SIGNATURE         Signation, used or primed name of mystered agent and the it aptitable         PORT Registered Agent agent registered Agent agent registered agent, or both, in the State of Florida. 1 am familiar with, an the obligations of registered agent.         SIGNATURE         Signation, used or prime have of gent ard the it aptitable         PORT Registered Agent agent registered Agent agent registered Agent agent registered agent.     <		E TRE THE REAL AND A DATE AND A MARKED AND A REAL AND A		P.O. BOX 241	· P	41	P.O. BOX 2	
ANDREW, PEARL 19667 NE 36TH CT TURNBERRY ISLE S APT 19A N MIAMI BEACH, FL 33180 B. The above named onlity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, an its obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent agent agent digitature registered agent digitature registered agent agent. SIGNATURE FILE NOWILI FEE 15 \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ITHE PEARL, ANDREW STRET ADDRESS STRET ADD	ed For pplicable	5 No Chg-P CR2E034 (10/03)  hear Applied 078612 Not App ste of Status Desired <b>\$8.75</b> Additional	01102 <b>CE</b> 4. FEI N 22-				E	
the obligations of registered agent.          SIGNATURE       Signature, speed or printed name of registered agent and life if applicable       (NOTE Registered Agent signature required when remateing)       DATE         FILE NOWILI FEE 13 \$150.00       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees         10.       OFFICERS AND DIRECTORS       Intel         INMALE       PEARL, ANDREW       State of the second s				stered Agent	19A	/, PEARL 36TH CT RRY ISLE S AP1	19667 NE TURNBEI	
NAME       PEARL, ANDREW         STREET ADDRESS       19667 NE 36TH CT         CITY-ST-ZPP       N MIAMI BEACH, FL         TITLE       U000000179296         NAME       01/13/05-80012-017 150         TITLE       NAME         STREET ADDRESS       DO NOT WRITE         TITLE       IN THE STREET ADDRESS         NAME       IN THE STREET ADDRESS         TITLE       IN THE STREET ADDRESS         TITLE       IN THIS SPACE		DATE		9. Election Campaign Finar Trust Fund Contribution.	\$ \$150.00 will be \$550.00	Signature, typed or printed LE NOWIII FEE lay 1, 2005 Fee	Fil After M 10.	
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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 supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or 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 Bl changed, or on an attachment with an address, with all other like empowered.  SIGNATURE:  SIGNATURE:  Devine Phone #	nation Jirector Jick 11 if	1/10/05		las.	Unlif	TURE:		