

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# S50802

**FILED**  
**Jul 18, 2006**  
**Secretary of State****Entity Name:** PINE LAKE, INC.**Current Principal Place of Business:**12029-12085 SW 1M AVE  
MIAMI, FL 33156 US**New Principal Place of Business:**1550 MADRUGA AVE STE 230  
CORAL GABLES, FL 33156 US**Current Mailing Address:**C/O SHANE SUCHMAN, R. E., CO  
1550 MADRUGA AVE S230  
CORAL GABLES, FL 33146 US**New Mailing Address:****FEI Number:** 65-0265325      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LAWRENCE E SUCHMAN  
1550 MADRUGA AVE SUITE 230  
CORAL GABLES, FL 33146 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SUCHMAN, CLIFFFORD L,  
Address: 1550 MADRUGA AVE S230  
City-St-Zip: CORAL GABLES, FL

Title: EVP ( ) Delete  
Name: SHANE, MARTIN H  
Address: 1550 MADRUGA AVE S230  
City-St-Zip: CORAL GABLES, FL

Title: VP ( ) Delete  
Name: SUCHMAN, LAWRENCE E  
Address: 1550 MADRUGA AVE S230  
City-St-Zip: CORAL GABLES, FL

Title: ST ( ) Delete  
Name: ROBERTS, PETER A  
Address: 1550 MADRUGA AVE S230  
City-St-Zip: CORAL GABLES, FL

Title: AS ( ) Delete  
Name: SUCHMAN, LAWRENCE E  
Address: 1550 MADRUGA AVE S230  
City-St-Zip: CORAL GABLES, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: LEITMAN, PHILIP B  
Address: 1550 MADRUGA AVE STE 230  
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the 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: CLIFFORD L SUCHMAN

P

07/18/2006

Electronic Signature of Signing Officer or Director

Date