2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

of the corporation of the re-if changed, or on an attach

SIGNATURE:

Apr 27, 2007 8:00 am Secretary of State DOCUMENT # \$97354 1. Entity Name 04-27-2007 90191 028 ***150.00 APPROVED PROPERTIES, INC. Principal Place of Business Mailing Address 580 VILLAGE BLVD 580 VILLAGE BLVD STE 150 STE 150 WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, ctc. CR2E034 (10/06) 1st MOORE Applied For City & State City & State 4. FEI Number 65-0303940 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo BERRY, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 580 VILLAGE BLVD STE 150 WEST PALM BEACH FL 33409 Zip Code 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 Signature, typed or printed name of registered agent and title it applicable DATE (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PTD ☐ Defete ☐ Addition HHE HILE ☐ Change SLADE, EDWARD NAME NAME 580 VILLAGE BLVD STE 150 STRUET ADDRESS STREET ADDRESS WEST PALM BEACH FL CHY-SI-ZIP CITY - ST-ZIP VSD ITTLE ☐ Delete MILL. ☐ Change Addition BERRY, MICHAEL NAME NAME 580 VILLAGE BLVD STE 150 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY - ST-ZIP CITY ST-7IP Berry, Chervi Smith 13thange 580 Village Blvo. Ste150 West Palm Beach, FL 33409 Addition ıttı Defete 1000 BERRY, CHERYL SMITH NAME NAME STREET ADDRESS 2895 ANTIETAM LANE STREET ADDRESS WEST PALM BEACH FL CITY - ST- ZIP CHY-ST-7IP TITLE ☐ Delete MIF ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY ST-ZIP IIIU. ☐ Delete HILLE ☐ Change ☐ Addition NAME NAME STRUET ADDRESS STRUCT ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Change Addition ш ☐ Delete ши NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST- ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 eath; that I am an officer or director of the corporation of the receiver or trustocyempowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

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