FILED Apr 17, 2003 8:00 am Secretary of State 04-17-2003 90633 011 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #	V07475
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1. Entity Name

AMERICAN EQUITY SITE DEVELOPERS, INC.				04-17-2003 90633 011 ****150.00	
Principal Place of Business 407 LINCOLN RD 9L MIAMI BEACH FL 33139 US 2. Principal Place of Business		Mailing Address 407 LINCOLN RD 9L MIAMI BEACH FL 33139 US 3. Mailing Address			
					Suite, Apt. #, etc.
City & State City & State			4. FEI Number 65-0317072 Applied For Not Applied For		
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curre	ent Registered Agent		7. Name and Address of New Registered Agent	
-	a grain a c	المهاد الدائق يبيرون البدائد الدائف	Name	The second of th	
rose, el	LEN		Street Address	(P.O. Box Number is Not Acceptable)	
ONE SE 1 #2400	THIRD AVE		dilectrication	VI.O. BOX HAMBOLIO HOLVIDGE PLANTS	
MIAMI FL	33131		City	FL Zip Code	
	tions of registered agent.			ered agent, or both, in the State of Florida. I am familiar with, and accept	
	Signature, typed or printed name of registered as	gent and title if applicable. (NO	TE: Registered Agent signature require	ed when reinstating) DATE	
Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.0 k Payable to Florida Departmen	i i		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees	
10.	OFFICERS A	ND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WIENER, HAIM 407 LINCOLN ROAD 9L MIAMI BEACH FL 33139	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARK, DANIA 407 LINCOLN RD 9L MIAMI FL 33139	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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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 gifter like empowered.

SIGNATURE: