2005 FOR PROFIT CORPORATION Amen les ANNUAL REPORT

DOCUMENT # V52296					FILED				
4515 PROPERTIES, INC.						05 M	AY -2 /	M II: (08
Principal Place of Business Mailing Address				See and The	-	_SECRE	TARY OF	TATS	- - -
3435 N. OCI		3435 N OCEAN BLVD	· ·			I ALI, AF	TARY OF IASSEE, I	FLORID	IA
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E034	(10/03)	61.25
City & State		City & State			4. FEI Numbe 65-0357		Applied For Not Applicable		
Zip	Country	Zip	Cour	ntry		of Status Desired		8.75 Add	litional
	6. Name and Address of Curre	ent Registered Agent			7. Name and	Address of New R		<u>, , , , , , , , , , , , , , , , , , , </u>	
ARCAINI, TONIO 3435 N OCEAN BLVD GULF STREAM, FL 33483				Name World Corn Street Address (2665 S. B	oorate Se P.O. Box Numbe ayshore D	rvices, In ris Not Acceptable rive, Sui	nc. te 703		
				City Miami			FL	Zlp Code 331	33
8. The above	named entity submits this statementions of registered agent.	it for the purpose of changing its	s register	ed office or register	red agent, or both	n, in the State of Flo	orida. I am fan	niliar with,	and accept
SIGNATURE,	3-10/1/	Harle Timoth	y D	Richards Id Agent signature required	I when reinstating)	4,	/19/05 DATE		
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2005 Fee will be \$55	9. Election Campa 0.00 Trust Fund Con			.00 May Be ed to Fees				
10.	OFFICERS AND DIRECTORS				ADDITIONS/0	CHANGES TO OFF	ICERS AND D	IRECTORS	S IN 11
TITLE NAME	P Delete			<u> </u>				Change	Addition
STREET ADDRESS CITY-ST-ZIP	3435 N OCEAN BLVD GULFSTREAM, FL 33483			EET ADDRESS ST-ZIP					
TITLE	D	☐ Delete	TITL	E				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	ARCAINI, REBECCA 3435 N. OCEAN BLVD. GULFSTREAM, FL 33485			ie Eet adoress '-st-zip	05/	50005+ 12/05010	4342)78002	335 ** ⁹	11.25
TITLE	GOLI STREAM, TE 33465	☐ Delete	TITL					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				EET ADDRESS -ST-ZIP				-	_
TITLE		☐ Delete	TITL					Change	Addition
NAME STREET ADDRESS		,	NAM STRE	E ET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
TITLE NAME		☐ Delete	TITL				С	Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STRE	ET ADDRESS -ST-ZIP					
TITLE		☐ Delete	TITL					Change	Addition
NAME STREET ADDRESS		16	NAM STRE	E ET ADDRESS				· ·	
CITY-ST-ZIP			CITY	-SY-ZIP					
12. I hereby of indicated of the corchanged,	certify that the information supplied von this report or supplemental reporporation or the receiver or trustee e or on an attachment with an address on the Arcaini	with filling does not qualify to the and securate and that to be secured to execute this report is, with all officiality empowered	r the exe my signa i as requi	mption stated in Se ture shall have the s red by Chapter 607 4/19/	ction 119.07(3)(i) same legal effect r, Florida Statutes	Fiorida Statutes. I as if made under of and that my name	further certify path; that I am appears in B	that the in an officer lock 10 or	formation or director Block 11 if
SIGNAT	URE:	OR PRINTED NAME OF SIGNING OFFICER	OB DISE					Pho *	[
	OMINITAL AND 19PED (on Francis NAME OF SIGNING OFFICER	UM LARECT			Date	Dayth	me Phone #	———— <u>—</u>
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