

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M95996

**Entity Name:** CITY SHOPPING CENTERS, INC.

**Current Principal Place of Business:**

535 W PIKE ST  
LAWRENCEVILLE, GA 30046

**Current Mailing Address:**

PO BOX 840306  
PEMBROKE PINES, FL 33084 US

**FEI Number:** 59-1805852

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROSTAMIAN, BEN  
5660 WASHINGTON ST  
HOLLYWOOD, FL 33023 US

*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

**Officer/Director Detail :**

Title            PMST  
Name            ROSTAMIAN, BEN  
Address        5660 WASHINGTON ST.,  
City-State-Zip: HOLLYWOOD FL 33023

*I hereby 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 all other like empowered.*

**SIGNATURE:** BEN ROSTAMIAN

**PRES**

**04/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date