2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004
Secretary of State

DOCUMENT# K14221

Entity Name: ZIER, INC.

Current Principal Place of Business:

1059 SHOTGUN RD
SUNRISE, FL 33326 US

New Principal Place of Business:

3350 ENTERPRISE AVE
SUITE 180
WESTON, FL 33331 US

Current Mailing Address:

560 COCONUT CIRCLE
FT. LAUDERDALE, FL 333263319 US

New Mailing Address:

560 COCONUT CIRCLE
WESTON, FL 333263319 US

FEI Number: 65-0038118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASIMORE, SUSAN
560 COCONUT CIRCLE
FT. LAUDERDALE, FL 33326 US

Name and Address of New Registered Agent:

MASIMORE, SUSAN
560 COCONUT CIRCLE
WESTON, FL 33326 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: _____ 03/25/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MASIMORE, SUSAN
Address: 560 COCONUT CIRCLE
City-St-Zip: FT. LAUDERDALE, FL 33326

Title: T ( ) Delete
Name: MASIMORE, CHARLES
Address: 560 COCONUT CIRCLE
City-St-Zip: FT. LAUDERDALE, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MASIMORE, SUSAN
Address: 560 COCONUT CIRCLE
City-St-Zip: WESTON, FL 33326

Title: T (X) Change ( ) Addition
Name: MASIMORE, CHARLES
Address: 560 COCONUT CIRCLE
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES MASIMORE T 03/25/2004
Electronic Signature of Signing Officer or Director — Date