2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2003
Secretary of State

DOCUMENT# M59733

Entity Name: DCI MANAGEMENT GROUP, INC.

Current Principal Place of Business:

7771 W OAKLAND PARK BLVD
STE 201
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

% DCI MGT GROUP
14500 N NORTHSIGHT STE 216
SCOTTSDALE, AZ 85260

New Mailing Address:

DCI MGT GROUP, LTD.
11811 N. TATUM BLVD. SUITE #3031
PHOENIX, AZ 85028

FEI Number: 65-0050277 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: QUEEN, RICHARD K
Address: 51 WEST 135TH STREET
City-St-Zip: KANSAS CITY, MO 64145

Title: V ( ) Delete
Name: RODRIGUEZ, JOSE G
Address: 7771 W. OAKLAND PARK BLVD., SUITE 201
City-St-Zip: SUNRISE, FL 33351

Title: S/D ( ) Delete
Name: ZISKO, WILLIAM E
Address: 200 PAGE MILL ROAD, SECOND FLOOR
City-St-Zip: PALO ALTO, CA 94306

Title: CEOD ( ) Delete
Name: ERICKSON, DAVID
Address: 14500 N. NORTHSIGHT, SUITE 216
City-St-Zip: SCOTTSDALE, AZ 85260

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CFOD (X) Change ( ) Addition
Name: ERICKSON, DAVID L
Address: 11811 N. TATUM BLVD. SUITE #3031
City-St-Zip: PHOENIX, AZ 85028

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: DAVID L. ERICKSON CFOD 04/15/2003

Electronic Signature of Signing Officer or Director — Date