2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 28, 2004 08:00 AM Secretary of State **DOCUMENT # P00000092615** R.J. FINLEASE, INC. Mailing Address Principal Place of Business 1580 N COUNRTNEY PKWY 1580 N COUNRYNEY PKWY MERRITT ISLAND, FL 32953 MERRITT ISLAND, FL 32953 No Chg-P CR2E034 (10/03) 04202004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3674885 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAHON, TIMOTHY K DO NOT WRITE 2929 EAST COMMERCIAL BLVD. PENTHOUSE E IN THIS SPACE FORT LAUDERDALE, FL 33308 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE SHAH, RAJESH J MAME STREET ADDRESS 536 N. COURTNEY PARKWAY MERRITT ISLAND, FL 32953 CITY-ST-ZIP U00000135178 04/28/04-80049-015 158.75 SVD TITLE SHAH, SAHRAD NAME STREET ADDRESS 536 N. COURTNEY PARKWAY MERRITT ISLAND, FL 32953 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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 other like empowered.

SIGNING OFFICER OR DIRECTOR

4.20.01

FILED