2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# P02000112514

Entity Name: GRIFFIN AND ASSOCIATES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

1451 W. CYPRESS CREEK ROAD
300
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

1000 W MCNAB ROAD
150
POMPANO BEACH, FL 33069

Current Mailing Address:

1451 W. CYPRESS CREEK ROAD
300
FORT LAUDERDALE, FL 33309

New Mailing Address:

1000 W MCNAB ROAD
150
POMPANO BEACH, FL 33069

FEI Number: 38-3662305 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLATOFF, ROBERT T ESQ.
7805 S.W. 6TH CT.
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: D ( ) Delete
Name: PEREZ, M
Address: 1451 W. CYPRESS CREEK RD., #300
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: O'BRIEN, T
Address: 1451 NW 62ND STREET, THIRD FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PEREZ, M
Address: 1000 W MCNAB ROAD, STE 150
City-St-Zip: POMPANO BEACH, FL 33069

Title: D (X) Change ( ) Addition
Name: O'BRIEN, T
Address: 1000 W MCNAB ROAD, STE 150
City-St-Zip: POMPANO BEACH, FL 33069

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: T OBRIEN D 04/21/2005

Electronic Signature of Signing Officer or Director — Date