2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 02, 2005 08:00 AM Secretary of State DOCUMENT # P03000040145 1. Entity Name SL DISTRIBUTORS, INC. Principal Place of Business Mailing Address 4400 NW 30TH STREET 4400 NW 30TH STREET # 426 # 426 COCONUT CREEK, FL 33066 COCONUT CREEK, FL 33066 04122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 81-0606831 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent DICRESCENZO, ANGELA DO NOT WRITE 3170 N FEDERAL HIGHWAY STE 103C IN THIS SPACE LIGHTHOUSE POINT, FL 33064 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, typed or printed name of registered agent and title if applicable (NOTE Rog stered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME LIND, STUART STREET ADDRESS 4400 NW 30TH STREET CITY-ST-ZIP COCONUT CREEK, FL 33066 440000554982 715/04/05-201054-025 150.00 TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 willy an address, with all other like appropriate.

FILED