2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# P03000096690

Entity Name: MEDCORPINTERIORS, INC.

Current Principal Place of Business:

8718 MAPLES POND CT
TRINITY, FL 34655

New Principal Place of Business:

8718 MAPLE POND CT
TRINITY, FL 34655

Current Mailing Address:

8718 MAPLES POND CT
TRINITY, FL 34655

New Mailing Address:

8718 MAPLE POND CT
TRINITY, FL 34655

FEI Number: 20-0206953 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PSTD ( ) Delete
Name: KASE, ERIC M
Address: 8718 MAPLES POND CT
City-St-Zip: TRINITY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: KASE, ERIC M
Address: 8718 MAPLE POND CT
City-St-Zip: TRINITY, FL 34655

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: ERIC KASE PSTD 04/26/2005

Electronic Signature of Signing Officer or Director — Date