2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000006331

Entity Name: JAY KIM, P.A

FILED Apr 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

200 S. BISCAYNE BLVD., STE. 4000 ONE FINANCIAL PLAZA MIAMI, FL 331312398

SUITE 2600

FORT LAUDERDALE, FL 33394

Current Mailing Address: New Mailing Address:

200 S. BISCAYNE BLVD., STE. 4000 ONE FINANCIAL PLAZA

SUITE 2600 MIAMI, FL 331312398

FORT LAUDERDALE, FL 33394

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 20-0578857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KIM, JAY

200 S. BISCAYNE BLVD., STE. 4000 ONÉ FINANCIAL PLAZA

MIAMI, FL 331312398 US SUITE 2600 FORT LAUDERDALE, FL 33394 US

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: JAY KIM 04/05/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

Name: KIM, JAY Name: KIM, JAY

200 S. BISCAYNE BLVD., STE. 4000 Address: ONE FINANCIAL PLAZA Address: City-St-Zip: MIAMI, FL 331312398 City-St-Zip: FORT LAUDERDALE, FL 33394

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 Statutés. 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: JAY KIM 04/05/2005 D

Electronic Signature of Signing Officer or Director

Date