2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 17, 2009
Secretary of State

DOCUMENT# 429730

Entity Name: E.A.P. MANAGEMENT CORP.

Current Principal Place of Business:

2501 HOLLYWOOD BLVD.
SUITE 220
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2501 HOLLYWOOD BLVD.
SUITE 220
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 59-1467601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SOLOMON, DON R.
2501 HOLLYWOOD BLVD.
SUITE 220
HOLLYWOOD, FL 33020 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SOLOMON, DON R.
Address: 2501 HOLLYWOOD BLVD SUITE 220
City-St-Zip: HOLLYWOOD, FL 33020

Title: S ( ) Delete
Name: SOLOMON, JOANNE
Address: 2501 HOLLYWOOD BLVD SUITE 220
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP ( ) Delete
Name: SREBRENIK, BURT
Address: 2501 HOLLYWOOD BLVD #220
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP ( ) Delete
Name: RODRIG, ROTEM
Address: 2501 HOLLYWOOD BLVD #220
City-St-Zip: HOLLYWOOD, FL 330206632 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SOLOMON, DON R.
Address: 2501 HOLLYWOOD BLVD SUITE 220
City-St-Zip: HOLLYWOOD, FL 33020

Title: S (X) Change ( ) Addition
Name: SREBRENIK, BURT
Address: 2501 HOLLYWOOD BLVD SUITE 220
City-St-Zip: HOLLYWOOD, FL 33020

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: SOLOMON, JOANNE
Address: 2501 HOLLYWOOD BLVD. #220
City-St-Zip: HOLLYWOOD, FL 330206632 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BURT SREBRENIK VP 08/17/2009

Electronic Signature of Signing Officer or Director — Date