2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 442649

Entity Name: TOMIKO ERICKSON, INC.

FILED Jan 06, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1733 NW 21 TERRACE 1733 NW 21 TERRACE MIAMI, FL 33142 MIAMI, FL 331427437 US

Current Mailing Address: New Mailing Address:

1733 NW 21 TERRACE 1733 NW 21 TERRACE MIAMI, FL 33142 MIAMI, FL 331427437 US

FEI Number: 59-1575733 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:

 ERICKSON, TOMIKO
 ERICKSON, TOMIKO S

 1733 N.W. 21 TER.
 1733 NW 21 TERRACE

 MIAMI, FL 331427347 US
 MIAMI, FL 331427437 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: TOMIKO ERICKSON 01/06/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

 Name:
 ERICKSON, PAUL R
 Name:
 ERICKSON, PAUL R

 Address:
 10100 E. CALUSA CLUB DR.
 Address:
 10100 E. CALUSA CLUB DR.

 City-St-Zip:
 MIAMI, FL 331862344
 City-St-Zip:
 MIAMI, FL 331862344 US

Title: S () Delete Title: S (X) Change () Addition Name: ERICKSON, ALAN W ERICKSON, ALAN W

 Name:
 ERICKSON, ALAN
 Name:
 ERICKSON, ALAN W

 Address:
 10100 E CALUSA CLUB DR
 Address:
 10100 E. CALUSA CLUB DR

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 331862344 US

() Delete Title: Title: P-D (X) Change () Addition ERICKSON, TOMIKO Name: ERICKSON, TOMIKO S PRES Name: 1733 NW 21 TERRACE 1733 NW 21 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 331427437 US

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: TOMIKO ERICKSON PRES 01/06/2005