2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005
Secretary of State

DOCUMENT# 828149

Entity Name: DMJMH+N, INC.

Current Principal Place of Business:

515 SOUTH FLOWER STREET
4TH FLOOR
LOS ANGELES, CA 90071

New Principal Place of Business:

Current Mailing Address:

515 SOUTH FLOWER STREET
4TH FLOOR
LOS ANGELES, CA 90071

New Mailing Address:

FEI Number: 95-2084998 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301 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:	CD	( ) Delete
Name:	ROYER, JAMES R	
Address:	5757 WOODWAY DRIVE	
City-St-Zip:	HOUSTON, TX 77057	
Title:	DEVP	( ) Delete
Name:	BOVAL, LAWRENCE S	
Address:	999 TOWN & COUNTRY RD.	
City-St-Zip:	ORANGE, CA 92868	
Title:	DVP	( ) Delete
Name:	SMITH, DOUGLAS D	
Address:	999 TOWN & COUNTRY RD.	
City-St-Zip:	ORANGE, CA 92868	
Title:	P	( ) Delete
Name:	LANDY, RAYMOND A	
Address:	515 SOUTH FLOWER STREET	
City-St-Zip:	LOS ANGELES, CA 90071	
Title:	EVP	( ) Delete
Name:	STEINKE, PAUL D	
Address:	515 SOUTH FLOWER STREET	
City-St-Zip:	LOS ANGELES, CA 90071	
Title:	VPS	( ) Delete
Name:	MILLER, ROBYN L	
Address:	515 S FLOWER ST	
City-St-Zip:	LOS ANGELES, CA 90071	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBYN MILLER VPS 01/13/2005

Electronic Signature of Signing Officer or Director — Date