2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004
Secretary of State

DOCUMENT# F29921

Entity Name: LAMONT & NEIMAN, P.A.

Current Principal Place of Business:

ONE BISCAYNE TOWER - SUITE 3550
2 SO. BISCAYNE BLVD.
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

ONE BISCAYNE TOWER - SUITE 3550
2 SO. BISCAYNE BLVD.
MIAMI, FL 33131

New Mailing Address:

FEI Number: 59-2095332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMONT, ROBERT S.
ONE BISCAYNE TOWER, SUITE 3550
2 SO. BISCAYNE BLVD.
MIAMI, FL 33131 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: SD ( ) Delete
Name: NEIMAN, JAN S.,
Address: 2 SO. BISCAYNE BLVD.
City-St-Zip: MIAMI, FL

Title: PD ( ) Delete
Name: LAMONT, ROBERT S.,
Address: 2 SO. BISCAYNE BLVD.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: NEIMAN, JAN S.,
Address: 2 SO. BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33131 US

Title: PD (X) Change ( ) Addition
Name: LAMONT, ROBERT S.,
Address: 2 SO. BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33131 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: ROBERT S. LAMONT PD 03/19/2004

Electronic Signature of Signing Officer or Director — Date