2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# F94000003396

Entity Name: PRIME RETAIL FINANCE, INC.

Current Principal Place of Business:

19TH FLOOR
100 EAST PRATT STREET
BALTIMORE, MD 21202

New Principal Place of Business:

Current Mailing Address:

19TH FLOOR
100 EAST PRATT STREET
BALTIMORE, MD 21202

New Mailing Address:

FEI Number: 52-1885613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MANN, WILLIAM J
GULF COAST FACTORY SHOPS
5461 FACTORY SHOPS BOULEVARD
ELLENTON, FL 34222 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: D ( ) Delete
Name: LUTTHANS, KIM E
Address: 100 EAST PRATT STREET, 19TH FLOOR
City-St-Zip: BALTIMORE, MD 21202

Title: PCD ( ) Delete
Name: RESCHKE, GLENN D
Address: 100 EAST PRATT STREET, 19TH FLOOR
City-St-Zip: BALTIMORE, MD 21202

Title: VSGC (X) Delete
Name: ANTILL, R. KELVIN
Address: 100 EAST PRATT STREET, 19TH FLOOR
City-St-Zip: BALTIMORE, MD 21202

Title: AS (X) Delete
Name: MARKWITZ, DEBRA J
Address: 100 EAST PRATT STREET, 19TH FLOOR
City-St-Zip: BALTIMORE, MD 21202

Title: T (X) Delete
Name: BRVENIK, ROBERT A
Address: 100 E PRATT ST 19TH FL
City-St-Zip: BALTIMORE, MD 21202

Title: SVPM (X) Delete
Name: MENO IV, FREDERICK J
Address: 100 E. PRATT ST., 19TH FLR.
City-St-Zip: BALTIMORE, MD 21202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LICHTENSTEIN, DAVID
Address: 326 THIRD STREET
City-St-Zip: LAKEWOOD, NJ 08701

Title: S (X) Change ( ) Addition
Name: CHANALES, SHELDON
Address: TWO PARK AVENUE
City-St-Zip: NEW YORK, NY 10016

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: DAVID LICHTENSTEIN P 04/14/2004

Electronic Signature of Signing Officer or Director — Date