²⁰⁰⁵ FOR PROFIT CORPORATION ANNUAL REPORT **FILED** Jan 18, 2005 08:00 AM

DOCUMENT # F9400003980 1. Entity Name R.W. DURHAM & COMPANY			Secretary of State	
21515 HAWTHORNE BLVD STE 355	Mailing Address 21515 HAWTHORNE BLVD STE 355 TORRANCE, CA 90503 US			
DO NOT WRITE I	N THIS SPAC	CE	01052005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For	
	To an analysis of the second o	And the second	95-3364660 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Reg	stered Agent		ree required	
HIQ CORPORATE SERVICES, INC. 526 E. PARK AVE. SUITE 200 TALLAHASSEE, FL 32301			DO NOT WRITE IN THIS SPACE	
8. The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tall.		ed office or register	red agent, or both, in the State of Florida. I am familiar with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing \$5. Addi	.00 May Be led to Fees	
10. OFFICERS AND DIRE	CTORS			
TITLE PDC NAME DURHAM, RALPH W STREET ADDRESS 2800 PASEO DEL MAR CITY-ST-ZIP PALOS VERDES ESTATES, CA 902				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000182950 01/19/05-80049-020 150,00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE				

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

(310)540-180D