2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# F98000000378

Entity Name: SRB MGT. CORP.

Current Principal Place of Business:

401 EAST LAS OLAS BLVD STE 1140
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22968
FORT LAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 65-0803024 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PC ( ) Delete
Name: BERRARD, STEVEN R
Address: 1600 SE 17 STREET STE 306
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VVC ( ) Delete
Name: BYRNE, THOMAS C
Address: 1600 SE 17 STREET STE 306
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S ( ) Delete
Name: AVCAMP, THOMAS
Address: 1600 SE 17 STREET STE 306
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: AUCAMP, THOMAS
Address: 1600 SE 17 STREET STE 306
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: THOMAS BYRNE WC 04/28/2006

Electronic Signature of Signing Officer or Director — Date