2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2004
Secretary of State

DOCUMENT# H25206

Entity Name: LIEBER & ARMSTRONG, INC.

Current Principal Place of Business:

4100 NE 2ND AVE
307
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

4100 NE 2ND AVE
307
MIAMI, FL 33137

New Mailing Address:

FEI Number: 12-7324268 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIEBER, ARNOLD
5934 PINETREE DRIVE
MIAMI BEACH, FL 33140

Name and Address of New Registered Agent:

LIEBER, ARNOLD
5757 ALTON ROAD
MIAMI BEACH, FL 33140

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: _____ 01/09/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LIEBER, LINDA,
Address: 5934 PINETREE DR
City-St-Zip: MIAMI BEACH, FL

Title: D ( ) Delete
Name: ARMSTRONG, BERYL,
Address: 1869 SW 12TH ST
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: LIEBER, ARNOLD,
Address: 5934 PINETREE DR
City-St-Zip: MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LIEBER, LINDA,
Address: 5757 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Change ( ) Addition
Name: ARMSTRONG, BERYL,
Address: 1869 SW 12TH ST
City-St-Zip: MIAMI, FL 33135

Title: D (X) Change ( ) Addition
Name: LIEBER, ARNOLD,
Address: 5757 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

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: BERYL ARMSTRONG VP 01/09/2004
Electronic Signature of Signing Officer or Director — Date