2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# H35848

Entity Name: ADAIR, FULLER, WITCHER & MALCOM, P.A. CERTIFIED PUBLIC ACCOUNTANTS

Current Principal Place of Business:

TRADE CENTRE SOUTH
100 W CYPRESS CRK RD, STE 1045
FT LAUDERDALE, FL 333092115 US

New Principal Place of Business:

Current Mailing Address:

TRADE CENTRE SOUTH
100 W CYPRESS CRK RD, STE 1045
FT. LAUD, FL 333092115 US

New Mailing Address:

FEI Number: 59-2474542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAIR, MICHAEL R
100 WEST CYPRESS CRK RD, STE 1045
FT LAUDERDALE, FL 33309 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: DP ( ) Delete
Name: ADAIR, MICHAEL R.,
Address: 3642 HIGH PINE DRIVE
City-St-Zip: CORAL SPRINGS, FL 330656011

Title: DVP ( ) Delete
Name: FULLER, STEVEN E.
Address: 3150 SW 135 TERRACE
City-St-Zip: DAVIE, FL 33330

Title: DS ( ) Delete
Name: WITCHER, TERRELL W.,
Address: 9040 SW 54 ST.
City-St-Zip: COOPER CITY, FL 33328

Title: DT ( ) Delete
Name: MALCOM, WILLIAM A.,
Address: 5738 REYNOLDS RD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILLIAM A. MALCOM DT 01/07/2004

Electronic Signature of Signing Officer or Director — Date