2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 30, 2005 08:00 AM DOCUMENT # H49815 **Secretary of State** SHOPPING CENTER MARKETING GROUP, INC. Principal Place of Business Mailing Address P. O. BOX 1488 P. O. BOX 1488 LARGO, FL 33779 LARGO, FL 33779 LIS 01042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2520489 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent RALEY, DOUGLAS DO NOT WRITE 109 25TH STREET BELLEAIR BEACH,, FL 33786 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Separature, typed or printed name of registered agent and life if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE RALEY, DOUGLAS NAME STREET ADDRESS 109 25TH ST U00000280157 --03/30/05-80006-025 150.00 CITY-ST-ZIP BELLEAIR BCH, FL TITLE RALEY, AUDREY T. MAKE 19 25TH ST STREET ADDRESS CITY-ST-ZIP BELLEAIR BCH, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not quality 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 trustge 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:

NATURE AND TYPED OR PRINTED RAME OF SYCHING OFFICER OR DIRECTOR

3.28.85 Date 727-586-1000 Osytime Phone #

FILED