2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006
Secretary of State

DOCUMENT# K19929

Entity Name: HAMILTON BANCORP INC.

Current Principal Place of Business:

717 PONCE DE LEON BLVD. STE 211
CORAL GABLES, FL 33134

New Principal Place of Business:

1172 SOUTH DIXIE HIGHWAY
PMB 410
MIAMI, FL 33146

Current Mailing Address:

1172 SOUTH DIXIE HIGHWAY
PMB 410
MIAMI, FL 33146

New Mailing Address:

FEI Number: 65-0105414 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EGP & ASSOICATIES INC.
717 PONCE DE LEON BLVD. STE. 211
CORAL GABLES,, FL 33134 US

Name and Address of New Registered Agent:

EGP & ASSOICATIES INC.
13223 SW 40 TERR
MIAMI, FL 33174 US

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: _____ 04/11/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPD ( ) Delete
Name: MASFERRER, EDUARDO A.
Address: 1172 S.DIXIE HIGHWAY,PMB 410
City-St-Zip: MIAMI, FL 33146

Title: D ( ) Delete
Name: ALEXANDER, WILLIAM
Address: 1172 S.DIXIE HIGHWAY,PMB 410
City-St-Zip: MIAMI, FL 33146

Title: VD ( ) Delete
Name: FRAZIER, RONALD E
Address: 1172 S.DIXIE HIGHWAY,PMB 410
City-St-Zip: MIAMI, FL 33146

Title: SVD ( ) Delete
Name: BERNACE, CARLOS
Address: 1172 S.DIXIE HIGHWAY,PMB 410
City-St-Zip: MIAMI, FL 33146

Title: D ( ) Delete
Name: LYLE, GEORGE
Address: 1172 S.DIXIE HIGHWAY,PMB 410
City-St-Zip: MIAMI, FL 33146

Title: D ( ) Delete
Name: LACAYO, RONALD
Address: 1172 S.DIXIE HIGHWAY,OMB 410
City-St-Zip: MIAMI, FL 33146

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:

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 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: EDUARDO A. MASFERRER CDP 04/11/2006
Electronic Signature of Signing Officer or Director — Date