

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44576

FILED
Apr 30, 2004
Secretary of State

Entity Name: EXECUTIVE FINANCIAL SERVICES, INC.

Current Principal Place of Business:

1075 NW 129 CT
MIAMI, FL 33182 US

New Principal Place of Business:

5468 OAK CREST BOULEVARD
SARASOTA, FL 34233 US

Current Mailing Address:

1075 NW 129 CT
MIAMI, FL 33182 US

New Mailing Address:

5468 OAK CREST BOULEVARD
SARASOTA, FL 34233 US

FEI Number: 65-0167831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, SARAH
1075 NW 129 CT
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

LOPEZ, SARAH
5468 OAK CREST BOULEVARD
SARASOTA, FL 34233 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: SARAH LOPEZ

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: LOPEZ, SARAH,
Address: 1075 NW 129 CT
City-St-Zip: MIAMI, FL 33182

Title: VP () Delete
Name: LLOBET, FERNANDO LOP, EZ
Address: 1075 NW 129 CT
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: LOPEZ, SARAH I
Address: 5468 OAK CREST BOULEVARD
City-St-Zip: SARASOTA, FL 34233

Title: VP (X) Change () Addition
Name: LOPEZ-DIAZ, FERNANDO F
Address: 5468 OAK CREST BOULEVARD
City-St-Zip: SARASOTA, FL 34233

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: SARAH LOPEZ

PTS

04/30/2004

Electronic Signature of Signing Officer or Director

Date