2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# M14319

Entity Name: SUGARMAN AND SUSSKIND, P.A.

Current Principal Place of Business:

2801 PONCE DE LEON BLVD
750
CORAL GABLES, FL 33134 US

New Principal Place of Business:

100 MIRACLE MILE
300
CORAL GABLES, FL 33134 US

Current Mailing Address:

2801 PONCE DE LEON BLVD
750
CORAL GABLES, FL 33134 US

New Mailing Address:

100 MIRACLE MILE
300
CORAL GABLES, FL 33134 US

FEI Number: 59-2539792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUSSKIND, HOWARD S.
2801 PONCE DE LEON BLVD
#700
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SUSSKIND, HOWARD S.
100 MIRACLE MILE
300
CORAL GABLES, FL 33134 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: 04/14/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SUSSKIND, HOWARD S.,
Address: 2801 PONCE DE LEON BLVD., 750
City-St-Zip: CORAL GABLES, FL

Title: DP ( ) Delete
Name: SUGARMAN, ROBERT A.,
Address: 2801 PONCE DE LEON BLVD., 750
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SUSSKIND, HOWARD S.,
Address: 100 MIRACLE MILE, #300
City-St-Zip: CORAL GABLES, FL 33134

Title: DP (X) Change ( ) Addition
Name: SUGARMAN, ROBERT A.,
Address: 100 MIRACLE MILE, #300
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify 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: HOWARD S. SUSSKIND D 04/14/2008
Electronic Signature of Signing Officer or Director — Date