2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 22, 2005
Secretary of State

DOCUMENT# M43642

Entity Name: MARKS HARRIS CORPORATION

Current Principal Place of Business:

9264 VISTA DEL LAGO (24A)
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9264 VISTA DEL LAGO (24A)
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 59-2758592 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERKOWITZ, PAUL
C/O GREENBERG TRAURIG
1221 BRICKELL AVE.
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: HARRIS, HAROLD D.,
Address: 9264 VISTA DEL LAGO
City-St-Zip: BOCA RATON, FL

Title: DVPS ( ) Delete
Name: BERKOWITZ, NAUREEN
Address: THE GABLES CLUB 60 EDGEWATER DR., UNIT 8C
City-St-Zip: CORAL GABLES, FL 33133

Title: DT ( ) Delete
Name: HARRIS, M. JOEL
Address: 33 CHRSTY LANE
City-St-Zip: SPRINGFIELD, NJ 07081

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPTD (X) Change ( ) Addition
Name: BERKOWITZ, MAUREEN
Address: THE GABLES CLUB 60 EDGEWATER DR., UNIT 8C
City-St-Zip: CORAL GABLES, FL 33133

Title: PTD (X) Change ( ) Addition
Name: HARRIS, M. JOEL
Address: 33 CHRSTY LANE
City-St-Zip: SPRINGFIELD, NJ 07081

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: MAUREEN BERKOWITZ VPTD 06/22/2005

Electronic Signature of Signing Officer or Director — Date