2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008689

Entity Name: NACAM UNITED, INC.

FILED Feb 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: PO BOX 460037 FORT LAUDERDALE, FL 33346 **Current Mailing Address: New Mailing Address:** PO BOX 460037 FORT LAUDERDALE, FL 33346 FEI Number: 86-1084461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FINK, EDWARD R 2000 S OCEAN DRIVE PH 3 FORT LAUDERDALE, FL 333163810 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Change () Addition () Delete ALLISTER, ALBERT Name: Name: 1220 N OCEAN BLVD Address: Address: City-St-Zip: GULF STREAM, FL 33483 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BERCHIELLI, GIAN L Name: Address: 9111 NW 45TH STREET Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: () Delete Title: () Change () Addition BROWN, ARTHUR A Name: Name: 511 BAYSHORE DR #710 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33304 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FINK, EDWARD R Name: 2000 S OCEAN DRIVE PH 3 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 333163810 City-St-Zip: Title: () Delete Title: () Change () Addition GREENFIELD, LEO Name: Name: 1721 E TRAFALGAR CIRCLE Address: Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: () Delete Title: () Change () Addition KIRKPATRICK, HUGH H Name: Name: Address: 2100 S OCEAN LANE #2008 Address: FT LAUDERDALE, FL 33316 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD R. FINK D 02/27/2004