2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004
Secretary of State

DOCUMENT# N93000001637

Entity Name: DEMOCRACY WORLDWIDE, INC.

Current Principal Place of Business:

6833 SW 84TH AVE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

6833 SW 84TH AVE
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0401072 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTONE, JAY
6833 SW 84TH AVE
MIAMI, FL 33143 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: P/D ( ) Delete
Name: SHREEVE, KENT W
Address: 1725 17TH ST. NW, SUITE 109
City-St-Zip: WASHINGTON, DC 20009

Title: VP/D ( ) Delete
Name: ARGUETA, JOSE MARIA
Address: 1725 17TH ST., NW, SUITE 109
City-St-Zip: WASHINGTON, DC 20009

Title: TS/D ( ) Delete
Name: CORNWELL, DAVID
Address: 1100 NEW YORK AVE., SUITE 600
City-St-Zip: WASHINGTON, DC 20005

Title: D ( ) Delete
Name: BRUCE, CAMERON
Address: 1725 17TH ST., NW, #111
City-St-Zip: WASHINGTON, DC 20009

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:

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: KENT W. SHREEVE PRES 05/17/2004

Electronic Signature of Signing Officer or Director — Date