2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004
Secretary of State

DOCUMENT# N97000003134

Entity Name: RITA AND JEROME J. COHEN FOUNDATION, INC.

Current Principal Place of Business:

1125 NE 125TH STRET
SUITE 206
NORTH MIAMI, FL 33161

New Principal Place of Business:

1125 NE 125TH STRET
SUITE 206
NORTH MIAMI, FL 33161 US

Current Mailing Address:

1125 NE 125TH STRET
SUITE 206
NORTH MIAMI, FL 33161

New Mailing Address:

1125 NE 125TH STRET
SUITE 206
NORTH MIAMI, FL 33161 US

FEI Number: 31-1574899 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, JEROME J
1125 NE 125TH STRET
SUITE 206
NORTH MIAMI, FL 33161 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: PSTD ( ) Delete
Name: COHEN, JEROME J
Address: 1125 NE 125TH ST., #206
City-St-Zip: NORTH MIAMI, FL 33161

Title: VD ( ) Delete
Name: COHEN, RITA
Address: 11111 BISCAYNE BLVD., #227
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: COHEN, LAWRENCE J
Address: 1920 NE 211 TERR
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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:

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: JEROME J. COHEN P 04/16/2004

Electronic Signature of Signing Officer or Director — Date