2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P00000025198

Entity Name: FORBES-THOMPSON INCORPORATED

Current Principal Place of Business:

11430 WASHINGTON BLVD.
MIAMI, FL 33176

New Principal Place of Business:

10700 CARIBBEAN BLVD
SUITE 312A
MIAMI, FL 33189

Current Mailing Address:

11430 WASHINGTON BLVD.
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0991715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMPSON-FORBES, DONNA
11430 WASHINGTON BLVD.
MIAMI, FL 33176 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: THOMPSON-FORBES, DONNA
Address: 11430 WASHINGTON BLVD.
City-St-Zip: MIAMI, FL 33176

Title: VD ( ) Delete
Name: FORBES, GREGORY
Address: 11430 WASHINGTON BLVD.
City-St-Zip: MIAMI, FL 33176

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D ( ) Change (X) Addition
Name: WALTERS, ZUKENN H
Address: 11430 WASHINGTON BLVD
City-St-Zip: MIAMI, FL 33176

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: DONNA FORBES P 04/29/2005

Electronic Signature of Signing Officer or Director — Date