2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2005
Secretary of State

DOCUMENT# P00000115064

Entity Name: CLAUDIA, INC

Current Principal Place of Business:

2363 NORTH BAY ROAD
MIAMI BEACH, FL 33140

New Principal Place of Business:

6430 THOMAS STREET
HOLLYWOOD, FL 33024

Current Mailing Address:

2363 NORTH BAY ROAD
MIAMI BEACH, FL 33140

New Mailing Address:

6430 THOMAS STREET
HOLLYWOOD, FL 33024

FEI Number: 65-1062264 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLZER, CLAUDIA L MS
2363 NORTH BAY ROAD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

POLZER, CLAUDIA L MS
6430 THOMAS STREET
HOLLYWOOD, FL 33024 US

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: _____ 04/10/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: POLZER, CLAUDIA L
Address: 2363 NORTH BAY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: POLZER, CLAUDIA L
Address: 6430 THOMAS STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: SECY ( ) Change (X) Addition
Name: POLZER, CHRISTOPHER M
Address: 6430 THOMAS STREET
City-St-Zip: HOLLYWOOD, FL 33024

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: CLAUDIA L. POLZER PRES 04/10/2005
Electronic Signature of Signing Officer or Director — Date