2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# P01000004881

Entity Name: BRAINS COMPANY

Current Principal Place of Business:

1172 S. DIXIE HWY.
SUITE475
CORAL GABLES, FL 33146

New Principal Place of Business:

1172 S DIXIE HWY.
#475
CORAL GABLES, FL 33146

Current Mailing Address:

1172 S. DIXIE HWY.
SUITE475
CORAL GABLES, FL 33146

New Mailing Address:

1172 S DIXIE HWY.
#475
CORAL GABLES, FL 33146

FEI Number: 65-1072959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE PABLO, AGUSTIN
1170 S. ALHAMBRA CIR.
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

DE PABLO, AGUSTIN
1172 S DIXIE HWY
#475
CORAL GABLES, FL 33146 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: 02/15/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DE PABLO, AGUSTIN
Address: 1170 S. ALHAMBRA CIR.
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DE PABLO, AGUSTIN
Address: 1172 S DIXIE HIGHWAY #475
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: AGUSTIN DE PABLO P 02/15/2006
Electronic Signature of Signing Officer or Director — Date