2004 FOR PROFIT CORPORATION

SIGNATURE:

Jun 01, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P01000025518** 06-01-2004 90005 007 ***150.00 BREWER ARCHITECTURE, INC. Principal Place of Business Mailing Address 54056094 85 SE 4TH AVENUE 85 SE 4TH AVENUE SUITE 101 **SUITE 101** DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483 2. Principal Place of Business 3. Mailing Address 85 SE4+5F Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 03202003 Chg-P City & State Applied For City & State 4. FFI Number Dalran 65-1087294 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ristina Hilsman BREWER, GEORGE Box Number is Not Acceptable) 85 SE 4TH AVENUE SUITE 101 DELRAY BEACH, FL 33483 8. 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. I am familiar with, and accept pep agen the obligations SIGNATUL (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE ☐ Change ■ Addition BREWER, GEORGE NAME NAME STREET ADDRESS 85 SE 4TH AVENUE #101 STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33483 CITY-ST-ZIP Delete TITLE ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Gedge Brewer

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

FILED

Daytime Phone #