2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# P01000041844

Entity Name: HOUSEHOLD FINANCIAL SYSTEMS, INC.

Current Principal Place of Business:

20401 NW 2ND AVE SUITE 300
MIAMI, FL 33169

New Principal Place of Business:

20401 NW 2ND AVE, SUITE 300
MIAMI, FL 33169

Current Mailing Address:

20401 NW 2ND AVE SUITE 300
MIAMI, FL 33169

New Mailing Address:

20401 NW 2ND AVE ,SUITE 300
MIAMI, FL 33169

FEI Number: 65-1096858 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RAMSAY, ERIC
20401 NW 2ND AVE SUITE 300
MIAMI, FL 33169 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: D ( ) Delete
Name: RAMSAY, ERIC
Address: 20401 NW 2ND AVE SUITE 300
City-St-Zip: MIAMI, FL 33169

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: RAMSAY, ERIC
Address: 20401 NW 2ND AVE ,SUITE 300
City-St-Zip: MIAMI, FL 33169

Title: PRES ( ) Change (X) Addition
Name: WATSON, PAMELLA
Address: 20401 N W 2ND AVE, SUITE 300
City-St-Zip: MIAMI, FL 33169

Title: V P ( ) Change (X) Addition
Name: RAMSAY, ERIC
Address: 20401 N W 2ND AVE, SUITE 300
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify 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: PAMELLA WATSON PRES 04/18/2008

Electronic Signature of Signing Officer or Director — Date