2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2005
Secretary of State

DOCUMENT# P01000043754

Entity Name: CALS INVESTORS INC

Current Principal Place of Business:

1606 BELMONT PLACE
BOYNTON BEACH, FL 33436

New Principal Place of Business:

4541 EMERALD VISTA
332
LAKE WORTH, FL 33461

Current Mailing Address:

1606 BELMONT PLACE
BOYNTON BEACH, FL 33436

New Mailing Address:

4541 EMERALD VISTA
332
LAKE WORTH, FL 33461

FEI Number: 65-1107225 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CALIDEEN, SHAFFINA
1606 BELMONT PLACE
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

CALIDEEN, SHAFFINA
4541 EMERALD VISTA
332
LAKE WORTH, FL 33461 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: 02/17/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CALIDEEN, SHAFFINA
Address: 1606 BELMONT PLACE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP ( ) Delete
Name: CALIDEEN, ANDY L
Address: 1606 BELMONT PLACE
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CALIDEEN, SHAFFINA
Address: 4541 EMERALD VISTA
City-St-Zip: 332, FL 33461

Title: VP (X) Change ( ) Addition
Name: CALIDEEN, ANDY L
Address: 4541 EMERALD VISTA
City-St-Zip: 332, FL 33461

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: SHAFFINA CALIDEEN P 02/17/2005
Electronic Signature of Signing Officer or Director — Date