2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2004
Secretary of State

DOCUMENT# P01000055413

Entity Name: DUFFY SHULER, INC.

Current Principal Place of Business:

8716 SW 16 ST
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

PO BOX 450613
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 65-1103772 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BERNGARD, GLEN
6421 CONGRESS AVE, SUITE 100
BOCA RATON, FL 33487 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: SHULER, DUFFY
Address: 8716 SW 16 ST
City-St-Zip: DAVIE, FL 33324

Title: V ( ) Delete
Name: SHULER, HA
Address: 8716 SW 16 ST
City-St-Zip: DAVIE, FL 33324

Title: S ( ) Delete
Name: SHULER, KITTY
Address: 9976 NOB HILL CT
City-St-Zip: SUNRISE, FL 33351

Title: M ( ) Delete
Name: DEMING, SHEVAN
Address: 12790 NW 11 PL
City-St-Zip: SUNRISE, FL 33323

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T ( ) Change (X) Addition
Name: TYRA, KAREN J
Address: 4489 NW 99 WAY
City-St-Zip: SUNRISE, FL 33351

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: DUFFY SHULER D 05/01/2004

Electronic Signature of Signing Officer or Director — Date