2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # P01000099062 1. Entity Name JAY A. TAPLIN, P.A. Mäiling Address Principal Place of Business 1555 PALM BEACH LAKES BLVD SUITE 1510 1555 PALM BEACH LAKES BLVD SUITE 1510 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 CR2E034 (10/03) 04262005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1144259 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TAPLIN, JAY A 1555 PALM BEACH LAKES BLVD SUITE 1510 WEST PALM BEACH, FL 33401 IN THIS SPACE 3. 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable "(NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME TAPLIN, JAY A 1555 PALM BEACH LAKES BLVD SUITE 1510 STREET ADDRESS - 400000337360 WEST PALM BEACH, FL 33401 CITY-ST-7IP 04/27/05-80165-009 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 or an attachment with an address, with all other like empowered.

NUIG OFFICER OR DIRECTOR

FILED

561-684-839