2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121247

Entity Name: EASTCOTE FINANCIAL ASSOCIATES, INC.

FILED May 07, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

5510 ORDUNA DRIVE 5830 S.W. 42 TERRACE CORAL GABLES, FL 33146 MIAMI, FL 33155

Current Mailing Address: New Mailing Address:

5510 ORDUNA DRIVE 5830 S.W. 42 TERRACE CORAL GABLES, FL 33146 MIAMI, FL 33155

FEI Number: 26-0009323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRYSON, VANESSA
5510 ORDUNA DRIVE
CORAL GABLES, FL 33146 US

BRYSON, VANESSA
5830 S.W. 42 TERRACE
MIAMI, FL 33155 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: VANESSA BRYSON 05/07/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

PSD () Delete Title: PSD (X) Change () Addition

 Name:
 BRYSON, VANESSA
 Name:
 BRYSON, VANESSA

 Address:
 5510 ORDUNA DRIVE
 Address:
 5830 S.W. 42 TERRACE

 City-St-Zip:
 CORAL GABLES, FL 33146
 City-St-Zip:
 MIAMI, FL 33155

Title: PSD () Delete Title: () Change () Addition
Name: BRYSON VANESSA Name:

 Name:
 BRYSON, VANESSA
 Name:

 Address:
 5830 S.W. 42 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33155 US
 City-St-Zip:

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: VANESSA BRYSON PS 05/07/2004