2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# P02000076536

Entity Name: CHAPIN MANAGEMENT GROUP INC.

Current Principal Place of Business:

17681 SW 4 CT.
PEMBROKE PINES, FL 33029

New Principal Place of Business:

5810 SW 195TH TERRACE
SOUTH WEST RANCHES, FL 33332

Current Mailing Address:

17681 SW 4 CT.
PEMBROKE PINES, FL 33029

New Mailing Address:

5810 SW 195TH TERRACE
SOUTH WEST RANCHES, FL 33332

FEI Number: 37-1435966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GARCIA, CARLOS
17681 SW 4 CT.
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

AGUERO, FRANCISCO J P.A.
1801 SW 3RD AVENUE, 6TH FLOOR
MIAMI, FL 33129 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: FRANCISCO AGUERO P.A. 04/30/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GARCIA, CARLOS
Address: 17681 SW 4 CT.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T ( ) Delete
Name: MUNOZ, ELYZABETH
Address: 17681 SW 4TH COURT
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GARCIA, CARLOS
Address: 5810 SW 195TH TERRACE
City-St-Zip: SOUTH WEST RANCHES, FL 33332

Title: T (X) Change ( ) Addition
Name: MUNOZ, ELYZABETH
Address: 5810 SW 195TH TERRACE
City-St-Zip: SOUTH WEST RANCHES, FL 33332

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: CARLOS GARCIA PD 04/30/2004
Electronic Signature of Signing Officer or Director — Date