2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003
Secretary of State

DOCUMENT# P02000092074

Entity Name: EL DORADO RETIREMENT HOME, CORP.

Current Principal Place of Business:

16233 NE 9TH AVENUE
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

430 NW 43RD STREET
MIAMI, FL 33127

Current Mailing Address:

16233 NE 9TH AVENUE
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 11-3649548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCMURRAY, LUCILLE M
16233 NE 9TH AVENUE
NORTH MIAMI BEACH, FL 33162

Name and Address of New Registered Agent:

MCMURRAY, LUCILLE M
10461 NW 5TH AVE
MIAMI, FL 33150

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: LUCILLE MCMURRAY 04/28/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCMURRAY, LUCILLE M
Address: 16233 NE 9TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD ( ) Delete
Name: CAMPBELL, WINFRED
Address: 20061 NW 14TH AVENUE
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MCMURRAY, LUCILLE M
Address: 10461 NW 5TH AVE
City-St-Zip: MIAMI, FL 33150

Title: ( ) Change ( ) Addition
Name:
Address:
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: LUCILLE MCMURRAY PD 04/28/2003
Electronic Signature of Signing Officer or Director — Date