2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110530

Entity Name: EBR GROUP INC.

FILED Feb 18, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2121 PONCE DE LEON BLVD. 531 NORTH OCEAN BLVD. SUITE 240 APT. 802 CORAL GABLES, FL 33134 POMPANO, FL 33062

Current Mailing Address: New Mailing Address:

1200 BRICKELL AVENUE 2121 PONCE DE LEON BLVD. SUITE 240 SUITE 900 CORAL GABLES, FL 33134 MIAMI, FL 33131

FEI Number: 11-3659562 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:

PRATS, GABRIEL AGI REGISTERED AGENTS, INC. 2121 PÓNCE DE LEON BLVD. 1200 BRICKELL AVENUE SUITE 240 SUITE 900 CORAL GABLES, FL 33134 MIAMI, FL 33131

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: ROBERT R. ADAMS 02/18/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition RODRIGUEZ, ELVIRA B RODRIGUEZ, ELVIRA B Name: Name:

2121 PONCE DE LEON BLVD. SUITE 240 531 NORTH OCEAN BLVD. APT. 802 Address: Address:

POMPANO, FL 33062 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

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

RODRIGUEZ, SYLVIA RODRIGUEZ, SYLVIA Name: Name:

2121 PONCE DE LEON BLVD. SUITE 240 531 NORTH OCEAN BLVD. APT.802 Address: Address:

CORAL GABLES, FL 33134 POMPANO, FL 33062 City-St-Zip: City-St-Zip:

TD () Delete RODRIGUEZ, JORGE L Title: Title: TD (X) Change () Addition

RODRIGUEZ, JORGE L Name: Name:

2121 PONCE DE LEON BLVD. SUITE 240 531 NORTH OCEAN BLVD, APT, 802 Address Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: POMPANO, FL 33062

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.

Ρ SIGNATURE: ELVIRA RODRIGUEZ 02/18/2004