2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P02000128550

Entity Name: BARBARA A. REISER & COMPANY, INC.

Current Principal Place of Business:

1607 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

New Principal Place of Business:

2199 PONCE DE LEON BLVD
5TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

1607 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

New Mailing Address:

2199 PONCE DE LEON BLVD
5TH
CORAL GABLES, FL 33134

FEI Number: 75-3090169 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COOPER, BONNIE L P.A.
50 WEST MASHTA DR., STE 4
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: REISER, BARBARA A
Address: 1607 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: REISER, BARBARA A
Address: 2199 PONCE DE LEON BLVD 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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: BARBARA A. REISER PRES 04/29/2005

Electronic Signature of Signing Officer or Director — Date