2005 FOR PROFIT CORPORATION

ANNUAL REPORT **FILED** Jan 21, 2005 08:00 AM Secretary of State **DOCUMENT # P03000052213** 1. Entity Name MATERIAL HANDLING BUSINESS SOLUTIONS, INC. Principal Place of Business Mailing Address 8730 SW 43 TERR 8730 SW 43 TERR MIAMI, FL 33165 MIAMI, FL 33165 01072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2363102 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SIERRA, JOSE A 8730 SW 43 TERR IN THIS SPACE MIAMI, FL 33165 8. 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. I am famillar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 107000183007 107000183007 1077-013 158, 75 OFFICERS AND DIRECTORS 10. TITLE SIERRA, JOSE A NAME 8730 SW 43 TERR STREET ADDRESS MIAMI, FL 33165 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY ST ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-70P TITLE NAME STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP

12. Thereby certify that the information supplied with this iffing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Daytime Phone if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: