2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR).

changed, or on an attachmen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Apr 21, 2004 8:00 am Secretary of State DOCUMENT # P03000086727 1. Entity Name 04-21-2004 90047 030 ***150 00 MALL OFFICE MANAGERS, INC. Principal Place of Business Mailing Address C/O ASSET SPECIALISTS, INC. C/O ASSET SPECIALISTS, INC. 2442 METROCENTRE BLVD 2442 METROCENTRE BLVD W PALM BEACH FL 33407-3105 W PALM BEACH FL 33407-3105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name . . . WHITE, JOHN II Street Address (P.O. Box Number is Not Acceptable) 1645 PALM BEACH LAKES BLVD STE 1200 W PALM BEACH FL 33401 City Zip Code 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 familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. President/Director Delete TITLE ☐ Change TITLE Thomas R. Gibson NAME NAME 2442 Metrocentre BIVA. STREET ADDRESS STREET ADDRESS West Paim Beach, K 33407 Vice President/Secretary/Director Change CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Robert A. Mc Intosh Robert A. Mc Intosh 3300 PGA BIVd. #020 Palm Beach, Gardins, Fl 33410 Vice President/Weasure/Director Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P Delete TITLE TITLE Peter V. UWIE __ 3300 PGA BIVD #620 NAME NAME STREET ADDRESS STREET ADDRESS Palm Beach Bardins, R. President/Director Randall Greene 3222 Embassy Drive CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS West Paim Beach, Fr. 33401 CITY-ST-ZIP CITY-ST-ZIP THE ☐ Delete ☐ Change ☐ Addition NAME NAME ī STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 receive for 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 chapter is not an address. With all other like enhanced.

FILED

Daytime Phone #