2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004
Secretary of State

DOCUMENT# P03000087277

Entity Name: ALL RISK RESTORATION, INC.

Current Principal Place of Business:

151 SW 7TH AVENUE
BOCA RATON, FL 33486

New Principal Place of Business:

483 SOUTH FLAGLER AVENUE
POMPANO BEACH, FL 33060

Current Mailing Address:

151 SW 7TH AVENUE
BOCA RATON, FL 33486

New Mailing Address:

483 SOUTH FLAGLER AVENUE
POMPANO BEACH, FL 33060

FEI Number: 20-0157598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOBIN & REYES, P.A.
7251 WEST PALMETTO PARK ROAD
SUTIE 205
BOCA RATON, FL 33433 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: ZULOAGA, PAUL
Address: 151 SW 7TH AVENUE
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete
Name: ROBERTS, RILEY
Address: 151 SW 7TH AVENUE
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition
Name: ZULOAGA, PAUL
Address: 151 SW 7TH AVENUE
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Change ( ) Addition
Name: ROBERTS, RILEY
Address: 399 SW 8TH TERRACE
City-St-Zip: BOCA RATON, FL 33486

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: PAUL ZULOAGA PRES 04/16/2004

Electronic Signature of Signing Officer or Director — Date