2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004
Secretary of State

DOCUMENT# P03000105566

Entity Name: EVOLUTION MARKETING SERVICES, INC.

Current Principal Place of Business:

412 GERONA AVENUE
CORAL GABLES, FL 33146

New Principal Place of Business:

1221 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131

Current Mailing Address:

412 GERONA AVENUE
CORAL GABLES, FL 33146

New Mailing Address:

1221 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131

FEI Number: 27-0066490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHUEPPERT, STENNING
412 GERONA AVENUE
CORAL GABLES, FL 33146

Name and Address of New Registered Agent:

SCHUEPPERT, STENNING
1001 BRICKELL BAY DRIVE
27TH FLOOR
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: 01/22/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SCHUEPPERT, HEATHER
Address: 2601 HERNANDO STREET UNIT 8
City-St-Zip: MIAMI, FL 33134

Title: DVS ( ) Delete
Name: SCHUEPPERT, STENNING
Address: 2601 HERNANDO STREET UNIT 8
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SCHUEPPERT, HEATHER
Address: 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: DVS (X) Change ( ) Addition
Name: SCHUEPPERT, STENNING
Address: 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

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: HEATHER SCHUEPPERT PD 01/22/2004
Electronic Signature of Signing Officer or Director — Date