2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2004
Secretary of State

DOCUMENT# P03000108713

Entity Name: PHOTO VERIFICATION SYSTEMS, INC.

Current Principal Place of Business:

C/O 218 ALVERIA AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

1330 WEST AVENUE
SUITE 604
MIAMI BEACH, FL 33139

Current Mailing Address:

C/O 218 ALVERIA AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

PO BOX 370627
MIAMI, FL 33137

FEI Number: 20-0293334 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHERMAN, THOMAS G
218 ALVERIA AVENUE
CORAL GABLES, FL 33134

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: PD ( ) Delete
Name: POLAKOFF, STEVEN
Address: 1330 WEST AVENUE, #604
City-St-Zip: MIAMI, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: STEVEN POLAKOFF PRES 03/02/2004

Electronic Signature of Signing Officer or Director — Date