2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P03000128306

Entity Name: MARINE HEALTHCARE APPLICATIONS, INC.

Current Principal Place of Business:

1923 BAGBERRY LANE
SOUTHPORT, FL 32409

New Principal Place of Business:

1923 BAYBERRY LANE
SOUTHPORT, FL 32409

Current Mailing Address:

1923 BAGBERRY LANE
SOUTHPORT, FL 32409

New Mailing Address:

1923 BAYBERRY LANE
SOUTHPORT, FL 32409

FEI Number: 27-0082417 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOHLSCHLAGER, MICHEAL A
1923 BAGBERRY LANE
SOUTHPORT, FL 32409

Name and Address of New Registered Agent:

WOHLSCHLAGER, MICHEAL A
1923 BAYBERRY LANE
SOUTHPORT, FL 32409

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: _____ 04/29/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LUDIN, BARBARA A
Address: 2250 AARRISON AVE
City-St-Zip: P.C., FL 32405

Title: VPST ( ) Delete
Name: WOHLSCHLAGER, MICHEAL A
Address: 1923 BAGBERRY LANE
City-St-Zip: SOUTHPORT, FL 32409

Title: VP ( ) Delete
Name: HALL, MICKEY A
Address: 202 GRAND ISLAND BLVD
City-St-Zip: P.C. BEACH, FL 32407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WOHLSCHLAEGER, MICHAEL A
Address: 1923 BAYBERRY
City-St-Zip: SOUTHPORT, FL 32409

Title: VP (X) Change ( ) Addition
Name: HALL, MICKEY A
Address: 116 R DAMON CIRCLE
City-St-Zip: P.C. BEACH, FL 32407

Title: ST (X) Change ( ) Addition
Name: WOHLSCHLAEGER, DIANA J
Address: 1923 BAYBERRY
City-St-Zip: SOUTHPORT, FL 32409

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: MICHAEL A. WOHLSCHLAEGER PRES 04/29/2004
Electronic Signature of Signing Officer or Director — Date