## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000155385

Entity Name: EXECUCORP MANAGEMENT ONE, INC

FILED Feb 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9319 TIBET POINTE CIRCLE 2516 JMT INDUSTRIAL DRIVE

WINDERMERE, FL 34786 SUITE 106

APOPKA, FL 32703

Current Mailing Address: New Mailing Address:

9319 TIBET POINTE CIRCLE 8427 MILANO DRIVE WINDERMERE, FL 34786 SUITE 1525

ORLANDO, FL 32810

FEI Number: 83-0382735 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAKIM, AARON H
4307 WINNERS CIRCLE
SUITE 824
SARASOTA, FL 34238 US
HAKIM, AARON H
8427 MILANO DRIVE
SUITE 1525
SUITE 1525
ORLANDO, FL 32810 US

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: AARON H. HAKIM 02/05/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PSTD (X) Change ( ) Addition

Name: HAKIM, AARON H Name: HAKIM, AARON H

Address: 9319 TIBET POINTE CIRCLE Address: 8427 MILANO DRIVE. SUITE 1525

City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: ORLANDO, FL 32810

Title: M (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HAMMOUD, AL
 Name:

 Address:
 30 CLARENDON CRES. SUITE 45
 Address:

 City-St-Zip:
 LONDON ONTARIO CANADA, ON N6C-5Y2
 City-St-Zip:

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HAKIM, HANA
 Name:

 Address:
 9319 TIBET POINTE CIRCLE
 Address:

 City-St-Zip:
 WINDERMERE, FL 34786
 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: AARON H. HAKIM PSTD 02/05/2004