2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005
Secretary of State

DOCUMENT# P04000023277

Entity Name: RSEM, INC.

Current Principal Place of Business:

1601 DIPOLMAT PKWY
HOLLYWOOD, FL 33019

New Principal Place of Business:

1601 DIPLOMAT PKWY
HOLLYWOOD, FL 33019

Current Mailing Address:

1601 DIPOLMAT PKWY
HOLLYWOOD, FL 33019

New Mailing Address:

1601 DIPLOMAT PKWY
HOLLYWOOD, FL 33019

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUBLOFF, CLAIRE
3 SW 129 AVE
PMEBROKE PINES, FL 33027 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: SCHAEFER, MARLA
Address: 60 E END AVE APT 21C
City-St-Zip: NEW YORK, NY 10028

Title: D ( ) Delete
Name: WALLER, ROBERTA
Address: 3 COLONIAL DR
City-St-Zip: UPPER BROOKVILLE, NY 11545

Title: D ( ) Delete
Name: SCHAEFER, E BONNIE
Address: 2070 N OCEAN BLVD STE 2
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete
Name: SCHAEFER, JAMIE
Address: 2070 N OCEAN BLVD STE 2
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: E. BONNIE SCHAEFER D 03/18/2005

Electronic Signature of Signing Officer or Director — Date