2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101713

Entity Name: FINWORTH, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 297633 P.O. BOX 171283 PEMBROKE PINES, FL 33029 US HIALEAH, FL 33017 US **Current Mailing Address: New Mailing Address:** P.O. BOX 297633 P.O. BOX 171283 PEMBROKE PINES, FL 33029 US HIALEAH, FL 33017 US FEI Number: 20-1348993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AGUILAR, OSCAR R 11890 SW 8TH STREET PENTHOUSE VII MIAMI, FL 33184 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition DUCKWORTH, KATRINA DUCKWORTH, KATRINA Name: Name: P.O. BOX 297633 P.O. BOX 171283 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: HIALEAH, FL 33017 Title: VΡ () Change (X) Addition Title: () Delete RUFFIN, ANTHONY Name: Name: P.O. BOX 171283 Address: Address: HIALEAH, FL 33017 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition RUFFIN, TAMEIKA Name: Name: P.O. BOX 171283 Address Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33017 Title: () Delete Title: () Change (X) Addition DUCKWORTH, BRIDGETT Name: Name: Address: Address: P.O. BOX 171283 City-St-Zip: City-St-Zip: HIALEAH, FL 33017 Title: Title: () Change (X) Addition () Delete DUCKWORTH, BARRY Name: Name: Address: P.O. BOX 171283 Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33017 Title: () Delete Title: () Change (X) Addition SANDERS, DEREK Name: Name: Address: Address: P.O. BOX 171283 City-St-Zip: City-St-Zip: HIALEAH, FL 33017

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: KATRINA DUCKWORTH P 04/28/2005