

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000157586

FILED
May 16, 2005
Secretary of State

Entity Name: EXERE, INC.

Current Principal Place of Business:

271 N.E 27 STREET
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

271 N.E 27 STREET
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 20-1901522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERO SALUSSOLIA CORPORATE MANAGEMENT, INC
1548 BRICKELL AVENUE
3RD FLOOR
MIAMI, FL 33129 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

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: SHIDDELL, MARK A
Address: 271 N.E 27 STREET
City-St-Zip: MIAMI, FL 33137 US

Title: T, S () Delete
Name: SHIDDELL, MARK A
Address: 271 N.E 27 STREET
City-St-Zip: MIAMI, FL 33137 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHIDDELL, MARK A
Address: 271 N.E 27 STREET
City-St-Zip: MIAMI, FL 33137 US

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

Title: P () Change (X) Addition
Name: GIORGIO, FANUCCHI
Address: VIA GIOVANNI DA PROCIDA 14
City-St-Zip: MILANO, MI 20149 IT

Title: VP () Change (X) Addition
Name: SHIDDELL, MARK A
Address: 271 N.E. 27 STREET
City-St-Zip: MIAMI, FL 33137 US

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: MARK A. SHIDDELL

D

05/16/2005

Electronic Signature of Signing Officer or Director

Date