2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2007
Secretary of State

DOCUMENT# P05000043080

Entity Name: EQUIVEST, INC.

Current Principal Place of Business:

18495 SOUTH DIXIE HIGHWAY
222
MIAMI, FL 33157

New Principal Place of Business:

8930 W. STATE ROAD 84
170
DAVIE, FL 33324

Current Mailing Address:

18495 SOUTH DIXIE HIGHWAY
222
MIAMI, FL 33157

New Mailing Address:

8930 W. STATE ROAD 84
170
DAVIE, FL 33324

FEI Number: 14-1925451 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, DARYL L
15820 SW 98 COURT
MIAMI, FL 33157 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: P ( ) Delete
Name: JONES, DARYL L
Address: 15820 SW 98 COURT
City-St-Zip: MIAMI, FL 33157

Title: VP ( ) Delete
Name: JAMES, SEBRINA
Address: 8930 STATE ROAD 84 #170
City-St-Zip: DAVIE, FL 33324

Title: T ( ) Delete
Name: WEBB, JOSEPH
Address: 6401 SW 87TH AVE SUITE 121
City-St-Zip: MIAMI, FL 33173

Title: S ( ) Delete
Name: JAMES, SEBRINA
Address: 8930 STATE ROAD 84 #170
City-St-Zip: DAVIE, FL 33324

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 Chapter 119, 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: SEBRINA JAMES S 01/14/2007
Electronic Signature of Signing Officer or Director — Date