2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2007
Secretary of State

DOCUMENT# P06000130560

Entity Name: EXPO SHOW MASTERS CORP.

Current Principal Place of Business:

1201 NE 191 ST
G210
MIAMI, FL 33179

New Principal Place of Business:

436 CASTERTON CIRCLE
DAVENPORT, FL 33897

Current Mailing Address:

1201 NE 191 ST
G210
MIAMI, FL 33179

New Mailing Address:

436 CASTERTON CIRCLE
DAVENPORT, FL 33897

FEI Number: 20-5720933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOPEZ, SARA
1201 NE 191 ST
G210
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

LOPEZ, SARA
436 CASTERTON CIRCLE
DAVENPORT, FL 33897 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: 09/13/2007
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LOPEZ, SARA
Address: 1201 NE 191 ST G210
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOPEZ, SARA
Address: 436 CASTERTON CIRCLE
City-St-Zip: DAVENPORT, FL 33897

I hereby certify that the information supplied with this filing does not qualify 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: SARA B LOPEZ PRES 09/13/2007
Electronic Signature of Signing Officer or Director — Date