2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005
Secretary of State

DOCUMENT# P24205

Entity Name: COMPUTER AID, INC.

Current Principal Place of Business:

1390 RIDGEVIEW DR
ALLENTOWN, PA 18104 US

New Principal Place of Business:

Current Mailing Address:

1390 RIDGEVIEW DR
ALLENTOWN, PA 18104 US

New Mailing Address:

FEI Number: 23-2180878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYER, JENNIFER
190 CONGRESS PARK DRIVE SUITE 180
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

BOYER, JENNIFER
2255 GLADES ROAD
SUITE 239W
BOCA RATON, FL 33431 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: _____ 04/18/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SALVAGGIO ANTHONY,
Address: 1432 CEDARWOOD RD.
City-St-Zip: ALLENTOWN, PA 18104

Title: SD ( ) Delete
Name: SALVAGGIO, NORENE
Address: 1432 CEDARWOOD RD.
City-St-Zip: ALLENTOWN, PA 18104

Title: AS ( ) Delete
Name: BREIDENBACH NANCY,
Address: 1644 MILLARD STREET
City-St-Zip: BETHLEHEM, PA

Title: AS ( ) Delete
Name: MCINTYRE, ANDREW
Address: 870 LAUREL DR
City-St-Zip: BETHLEHEM, PA

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: ANDREW MCINTYRE AS 04/18/2005
Electronic Signature of Signing Officer or Director — Date