2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 19, 2004 8:00 am te

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DOCUMENT # P93000004162 1. Entity Name RON-PRO INVESTORS, INC. Mailing Address Principal Place of Business DUBNER, ANNETTE 7555 MANDARIN DRIVE BOCA RATON, FL 33433 7555 MANDARIN DR BOCA RATON, FL 33433 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302004 Chg-P CR2E034 (10/03) Applied For 4. FEI Number City & State City & State 65-0393601 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DUBNER, ANNETTE N-Street Address (P.O. Box Number is Not Acceptable) 7555 MANDARIN STREET BOCA RATON, FL 33433 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. DATE 9." Election Campaign Financing \$5.00 May Be FILE NOW!!! - FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11; OFFICERS AND DIRECTORS 10. 11. Addition TITLE Delete TITLE Change DUBNER; ANNETTE NAME NAME STREET ADDRESS 7555 MANDARIN DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP BOCA RATON, FL 33433 TITLE ☐ Char.ge ☐ Addition TITLE Delete STRUPP, LESLIE NAME NAME STREET ADDRESS 13703 ROSETREE COURT STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP CHANTILLY, VA 22021 ☐ Delete TITLE Addition TITLE DUBNER, BRADLEY NAME NAME STREET ADDRESS 7555 MANDARIN DRIVE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 1 CITY-ST-ZIP Change Addition TITI F TITLE ☐ Delete NAME NAME 1 STREET ADDRESS STREET ADDRESS . CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Date

Daytime Phone #