2004 FOR PROFIT CORPORATION ANNUAL REPORT

Timothy D. Richards

DOCUMENT # P95000032141 FILED 1. Entity Name BRP CLUB INC. 04 MAY -3 PM 5:55 SECRETARY OF STATE TALLAHASONE, PLOBIDA Principal Place of Business Mailing Address 2665 S. BAYSHORE DRIVE 2665 S. BAYSHORE DRIVE SUITE 703 SUITE 703 MIAMI, FL 33133 US MIAMI, FL 33133 US 04212004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0593649 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WORLD CORPORATE SERVICES DO NOT WRITE 2665 S. BAYSHORE DRIVE **SUITE 703** IN THIS SPACE MIAMI, FL 33133 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. 85/87/84 - 01643 - 694 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 500035750785 05/07/04--01043--004 **900.00 TITLE RICHARDS, TIMOTHY D 2665 S. BAYSHORE DR. SUITE 703 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133 DPS TITLE RIEKER, BIRGIT NAME 16750 KNIGHTSBRIDGE LANE STREET ADDRESS DELRAY BEACH, FL 33484 CITY-ST-ZIP TITI F STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

CER OR DIRECTOR

4/21/04 (305) 858-9900

Daytime Phone #