2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# P95000068932

Entity Name: N.R. MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

2237 N COMMERCE PKWY
SUITE #3
WESTON, FL 33326

New Principal Place of Business:

ONE EAST BROWARD BLVD.
SUITE #1010
FORT LAUDERDALE, FL 33301

Current Mailing Address:

2237 N COMMERCE PKWY
SUITE #3
WESTON, FL 33326

New Mailing Address:

ONE EAST BROWARD BVD.
SUITE #1010
FORT LAUDERDALE, FL 33301

FEI Number: 65-0609982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MANELLA, ROSS H ESQ
2237 N COMMERCE PKWY
SUITE #3
WESTON, FL 33326 US

Name and Address of New Registered Agent:

MANELLA, ROSS H ESQ
ONE EAST BROWARD BLVD.
SUITE #1010
FORT LAUDERDALE, FL 33301 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: ROSS H. MANELLA ESQ. 04/22/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SMILEY, NORMAN
Address: 7190 MALLORCA CRESCENT
City-St-Zip: BOCA RATON, FL 33433

Title: STD ( ) Delete
Name: SMILEY, RICKIE
Address: 7190 MALLORCA CRESCENT
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NORMAN SMILEY PD 04/22/2005
Electronic Signature of Signing Officer or Director — Date