2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004
Secretary of State

DOCUMENT# P96000102394

Entity Name: GHO PROPERTIES, INC.

Current Principal Place of Business:

5670 CORPORATE WAY
WEST PALM BEACH, FL 33407

New Principal Place of Business:

2541 METROCENTRE BLVD
SUITE 1
WEST PALM BEACH, FL 33407

Current Mailing Address:

5670 CORPORATE WAY
WEST PALM BEACH, FL 33407

New Mailing Address:

2541 METROCENTRE BLVD
SUITE 1
WEST PALM BEACH, FL 33407

FEI Number: 65-0723824 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANDLER, WILLIAM N ESQ
5670 CORPORATE WAY
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

HANDLER, WILLIAM N ESQ
2541 METROCENTRE BLVD
SUITE 1
WEST PALM BEACH, FL 33407 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: 04/06/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: HANDLER, DAN
Address: 5670 CORPORATE WAY
City-St-Zip: WEST PALM BEACH, FL

Title: PSD ( ) Delete
Name: HANDLER, WILLIAM N
Address: 5670 CORPORATE WAY
City-St-Zip: WEST PALM BEACH, FL

Title: TD ( ) Delete
Name: HANDLER, SUSAN
Address: 5670 CORPORATE WAY
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change ( ) Addition
Name: HANDLER, DAN
Address: 2541 METROCENTRE BLVD.,SUITE 1
City-St-Zip: WEST PALM BEACH, FL 33407

Title: PSD (X) Change ( ) Addition
Name: HANDLER, WILLIAM N
Address: 2541 METROCENTRE BLVD.,SUITE 1
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TD (X) Change ( ) Addition
Name: HANDLER, SUSAN
Address: 2541 METROCENTRE BLVD.,SUITE 1
City-St-Zip: WEST PALM BEACH, FL 33407

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: WILLIAM N HANDLER PSD 04/06/2004
Electronic Signature of Signing Officer or Director — Date