2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2005
Secretary of State

DOCUMENT# P98000012044

Entity Name: THE PRIMUS GROUP INC.

Current Principal Place of Business:

2499 W. GLADES RD., SUITE 207
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 871
DEERFIELD BEACH, FL 334430871

New Mailing Address:

FEI Number: 65-0809954 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LENNON, HENRY M
2499 W GLADES RD #207
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: BURKE, ROBERT M.D.
Address: 5405 OKEECHOBEE BLVD., #101
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VC ( ) Delete
Name: WEINER, HOWARD M MDMPH
Address: 9980 CENTRAL PARK BLVD, NORTH #102
City-St-Zip: BOCA RATON, FL 33428

Title: ST ( ) Delete
Name: LENNON, HENRY M BDS
Address: 2499 W. GLADES RD., SUITE 207
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition
Name: BURKE, ROBERT M.D.
Address: 5405 OKEECHOBEE BLVD., #101
City-St-Zip: WEST PALM BEACH, FL 33417

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change ( ) Addition
Name: LENNON, HENRY M BDS
Address: 2499 W. GLADES RD., SUITE 207
City-St-Zip: BOCA RATON, FL 33431

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: HENRY M. LENNON C 04/02/2005

Electronic Signature of Signing Officer or Director — Date