2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2004
Secretary of State

DOCUMENT# P98000092347

Entity Name: CSI CONSULTING, INC.

Current Principal Place of Business:

941 N.E. 19TH AVE.
SUITE 310
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

941 N.E. 19TH AVE.
SUITE 310
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-0906917 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHINDER, BARRY S ESQ.
1946 TYLER ST
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

SCHINDER, BARRY S ESQ.
3107 STERLING ROAD
105
FORT LAUDERDALE, FL 33312 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: 01/05/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: ADAMS, JAMES
Address: 941NE 19TH AVE STE 310
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: P ( ) Delete
Name: DELGADO, LEO
Address: 941 NE 19TH AVE STE 310
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: DS ( ) Delete
Name: ALPERT, STEVE
Address: 941 NE 19TH AVE STE 310
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VSTD (X) Change ( ) Addition
Name: ALPERT, STEVEN
Address: 941 NE 19TH AVE STE 310
City-St-Zip: FORT LAUDERDALE, FL 33304

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: STEVEN ALPERT VSTD 01/05/2004
Electronic Signature of Signing Officer or Director — Date