2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# P99000007555

Entity Name: FLORIDA MOBILE FOOT CARE INC.

Current Principal Place of Business:

1900 EAGLE TRACE BLVD E
POMPANO BEACH, FL 33071

New Principal Place of Business:

2551 N W 118TH DRIVE
CORAL SPRINGS, FL 33065

Current Mailing Address:

1900 EAGLE TRACE BLVD E
POMPANO BEACH, FL 33071

New Mailing Address:

P.0. BOX 8351
CORAL SPRINGS, FL 33075

FEI Number: 65-0895453 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAZARUS, LESLIE J
1900 EAGLE TRACE BLVD E
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

LAZARUS, LESLIE J
2551 N.W. 118TH DRIVE
CORAL SPRINGS, FL 33065 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: 04/28/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: LAZARUS, LESLIE J
Address: 1900 EAGLE TRACE BLVD EAST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: TREA ( ) Delete
Name: LAZARUS, LESLIE J
Address: 1900 EAGLE TRACE BLVD EAST
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: MARTIN, CAROL A
Address: 2551 N.W. 118TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TREA (X) Change ( ) Addition
Name: LAZARUS, LESLIE J
Address: 2551 N. W. 118TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: CAROL MARTIN PRES 04/28/2004
Electronic Signature of Signing Officer or Director — Date