2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2003
Secretary of State

DOCUMENT# P99000045406

Entity Name: VENECORP, INC.

Current Principal Place of Business:

4701 N.W. 14TH STREET
SUNRISE, FL 33313

New Principal Place of Business:

949 GOLDEN CANE DRIVE
WESTON, FL 33327

Current Mailing Address:

4701 N.W. 14TH STREET
SUNRISE, FL 33313

New Mailing Address:

949 GOLDEN CANE DRIVE
WESTON, FL 33327

FEI Number: 65-0920870 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DEFELICE, CARLOS R P
4701 NW 14 TH STREET
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

DEFELICE, CARLOS R P
949 GOLDEN CANE DRIVE
WESTON, FL 33327 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: _____ 04/19/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DEFELICE, CARLOS R
Address: 949 GOLDEN CANE DRIVE
City-St-Zip: WESTON, FL 33327

Title: S ( ) Delete
Name: DEFELICE, ELSY F
Address: 949 GOLDEN CANE DRIVE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: CAMACHO DEFELICE, ELSY F
Address: 949 GOLDEN CANE DRIVE
City-St-Zip: WESTON, FL 33327

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: CARLOS R. DEFELICE P 04/19/2003
Electronic Signature of Signing Officer or Director — Date