2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2004
Secretary of State

DOCUMENT# S12293

Entity Name: AMCAL MANAGEMENT CORP.

Current Principal Place of Business:

1392 NORTHJ KILLIAN DRIVE, STE 201
LAKE PARK, FL 33403 US

New Principal Place of Business:

1392 NORTH KILLIAN DRIVE
SUITE 201
LAKE PARK, FL 33403 US

Current Mailing Address:

1392 NORTHJ KILLIAN DRIVE, STE 201
LAKE PARK, FL 33403 US

New Mailing Address:

1392 NORTH KILLIAN DRIVE
SUITE 201
LAKE PARK, FL 33403 US

FEI Number: 65-0232156 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEMADENI, DAVID
1392 NORTH KILLIAN DRIVE, STE 201
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

SEMADENI, DAVID
1392 NORTH KILLIAN DRIVE
SUITE 201
LAKE PARK, FL 33403 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: 06/15/2004
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SEMADENI, DAVID,
Address: 230 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: C ( ) Delete
Name: SEMADENI, NORMA
Address: 230 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: ST ( ) Delete
Name: SEMAIENI, PETER
Address: 230 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SEMADENI, DAVID
Address: 1392 NORTH KILLIAN DRIVE
City-St-Zip: LAKE PARK, FL 33403

Title: C (X) Change ( ) Addition
Name: SEMADENI, NORMA
Address: 1392 NORTH KILLIAN DRIVE
City-St-Zip: LAKE PARK, FL 33403

Title: ST (X) Change ( ) Addition
Name: SEMADENI, PETER
Address: 1392 NORTH KILLIAN DRIVE
City-St-Zip: LAKE PARK, FL 33403

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: DAVID SEMADENI PRES 06/15/2004
Electronic Signature of Signing Officer or Director — Date