🗘 با تهمید 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 23, 2004 8:00 am Secretary of State DOCUMENT # S46267 01-23-2004 90016 037 ***150 00 SRG HOLDING, CORP. Principal Place of Business Mailing Address 5201 BLUE LAGOON DRIVE 5201 BLUE LAGOON DRIVE SUITE 100 SUITE 100 MIAMI, FL 33126 MIAMI, FL 33126 No Cha-P CR2E034 (10/03) 01062004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0266618 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent. CAHAN, RICHARD J. ALAN DO NOT WRITE C/O BECKER & POLIAKOFF P.A. 5201 BLUE LAGOON DRIVE SUITE 100 IN THIS SPACE MIAMI, FL 33126 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ROBERTS, GREGORY NAME STREET ADDRESS **BAY STREET & VICTORIA AVE.N** CITY-ST-ZIP NASSAU, BAHAMAS, TITI F ROBERTS, GREGORY NAME BAY STREET & VICTORIA AVENUE N. STREET ADDRESS NASSAU, BAHAMAS, CITY-ST-ZIP TITLE CAHAN, RICHARD J.ALAN NAME 5201 BLUE LAGOON DRIVE, SUITE 100 STREET ADDRESS DO NOT WRITE MIAMI, FL 33126 CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-7IP

KELOKY D. RULERTS

FILED