2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S53896

Entity Name: E.A. R.E. CORP.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

400 S. POINTE DR., #2202 400 S. POINTE DR.

MIAMI BEACH, FL 331397361 #2202

MIAMI BEACH, FL 331397361 US

Current Mailing Address: New Mailing Address:

400 S. POINTE DR., #2202 400 S. POINTE DR.

MIAMI BEACH, FL 331397361 #2202

MIAMI BEACH, FL 331397361 US

FEI Number: 65-0272742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLISS, EDWIN C 400 S. POINTE DR., #2202 BLISS, EDWIN C 400 S. POINTE DR.

MIAMI BEACH, FL 331397361 US #2202

MIAMI BEACH, FL 331397361 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: 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition

Name: BLISS, E C, Name: BLISS, E C MR

Address: 400 S POINTE DR #2202 Address: 400 S POINTE DR #2202 City-St-Zip: MIAMI BEACH, FL 331397361 US

Title: VS () Delete Title: VS (X) Change () Addition

Name: BLISS AIDA S., Name: BLISS, AIDA S MRS

 Address:
 400 S POINTE DR #2202
 Address:
 400 S POINTE DR #2202

 City-St-Zip:
 MIAMI BEACH, FL 331397361
 City-St-Zip:
 MIAMI BEACH, FL 331397361 US

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: E C BLISS P 04/29/2005