2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 19, 2005 08:00 AM Secretary of State DOCUMENT # V31599 1. Entity Name EXCALIBUR ELECTRONICS, INC. Principal Place of Business Mailing Address 13755 SW 119TH AVENUE 13755 SW 119TH AVENUE MIAMI, FL 33186 US _ MIAMI, FL 33186 US 02092005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0331527 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAMOLE, MYRON M. DO NOT WRITE 9700 S DIXIE HWY **SUITE 1030** IN THIS SPACE MIAMI, FL 33156 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME SAMOLE, SHANE 13755 SW 119TH AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 =U000000235912 TITLE 02/19/05-80025-004 158.75 NAME SCHNEIDER, WERNER STREET ADDRESS 15581 S.W. 146TH AVENUE MIAMI, FL 33177 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling 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.

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NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WERNER O. SCHNEIDER 766 16 0 S

SECRETARY