

FROM

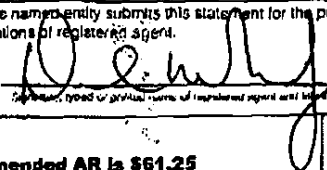
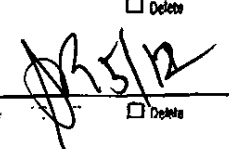
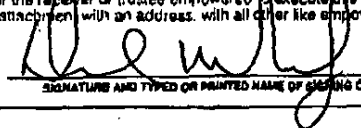
(THU) 4.22'04 1

04-28-2004 90176 043 *****61.25
P00000015238**2004 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

04 MAY 12 AM 10:59

TALLAHASSEE, FLORIDA

94069308

DOCUMENT # P00000015238			
1. Entity Name SENDETEC, INC.			
Principal Place of Business 9400 4TH STREET NORTH, SUITE 200 ST PETERSBURG, FL 33702		Mailing Address 9400 4TH STREET NORTH, SUITE 200 ST PETERSBURG, FL 33702	
2. Principal Place of Business 877 Executive Center Drive W		3. Mailing Address 877 Executive Center Drive W	
Suite, Apt. #, etc. Suite 300		Suite, Apt. #, etc. Suite 300	
City & State St. Pete, FL		City & State St. Pete, FL	
Zip 33702	Country USA	Zip 33702	Country USA
4. FEI Number 59-3626325		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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  DATE 4/22/04 (Signature, typed or printed name of registered agent and date required. (NOTE: Registered Agent signature required when changing))			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOLTOFF, PAUL 9400 4TH STREET N #200 SAINT PETERSBURG, FL 33702 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO, D Paul Soltoff, Soltoff, Paul 877 Executive Center Drive W. #300 St. Pete, FL 33702 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OBECK, ERIC 9400 4TH STREET N #200 SAINT PETERSBURG, FL 33702 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D Obbeck, Eric 877 Executive Center Drive W. #300 St. Pete, FL 33702 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GOULD, DONALD 9400 4TH STREET N #200 SAINT PETERSBURG, FL 33702 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Gould, Donald 877 Executive Center Drive W. #300 St. Pete, FL 33702 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENE, HARRY 9400 4TH STREET N #200 SAINT PETERSBURG, FL 33702 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, D Greene, Harry 877 Executive Center Drive W. #300 St. Pete, FL 33702 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO Vance Allen 877 Executive Center Drive W #300 St. Pete, FL 33702 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Brechner, Trv 877 Executive Center Drive W. #300 St. Pete, FL 33702 ☐ Change ☒ Addition
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 807, 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.			
SIGNATURE: 		Date 4/22/04 (727) 576-6630 x140	