2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071599

Entity Name: INTEGRALNET MARKETING, INC.

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

11443 H W PALMETTO PARK ROAD 4171 W HILLSBORO BLVD

BOCA RATON, FL 33428

COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

11443 H W PALMETTO PARK ROAD 4171 W HILLSBORO BLVD BOCA RATON, FL 33428 4

COCONUT CREEK, FL 33073

FEI Number: 65-1031623 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:

BRYN, MARK J. % BRYN & ASSOCIATES, P.A. 2 SOUTH BISCAYNE BLVD., SUITE 2680 MIAMI, FL 33131 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: LEVINSON, JORDAN Name: LEVINSON, JORDAN Address: 4171 W HILL SRORO BLVD. STE

Address: 11443 H PALMETTO PARK ROAD Address: 4171 W HILLSBORO BLVD. STE 4
City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: COCONUT CREEK, FL 33073

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

Name: ZIMMERMAN, JASON Name: ZIMMERMAN, JASON

Address: 11443 H W PALMETTO PARK ROAD Address: 4171 W HILLSBORO BLVD. STE 4
City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: COCONUT CREEK, FL 33073

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: JORDAN LEVINSON D 04/22/2004