## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000088772

5720 PGA BLVD. # 521

ORLANDO, FL 32839

Address:

City-St-Zip:

Entity Name: NETWORK EDUCATION SYSTEMS CORP

FILED Jan 15, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1516 E. COLONIAL DR. #103 ORLANDO, FL 32803 **New Mailing Address: Current Mailing Address:** 1516 E. COLONIAL DR. #103 ORLANDO, FL 32803 FEI Number: 59-3743023 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: SHINDOLL, FLORALEE 4601 JUDY COURT ORLANDO, FL 32839 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: Title: ( ) Delete Title: () Change () Addition PORTIGLIATTI, ANTHONY B Name: Name: 6131 SAINT IVES BLVD. Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ( ) Delete Title: DV Title: () Change () Addition Name: MAIA. PAULO R Name:

Address:

City-St-Zip:

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: ANTHONY B. PORTIGLIATTI PD 01/15/2004