

2005  
**2004 FOR PROFIT CORPORATION  
 AMENDED ANNUAL REPORT**

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

05 FEB -7 PM 4: 31

01/10/05 01026 017 \$ 61.25



12222004 Chg-P CR2E034 (10/03)

**DOCUMENT # P02000134821**  
 1. Entity Name  
 REAL TIME X, CORP.



Principal Place of Business Mailing Address  
 3902 CITY AVENUE ADAMS # B 3902 CITY AVENUE ADAMS # B  
 1013 1013  
 PHILADELPHIA, PA 19131 US PHILADELPHIA, PA 19131 US

2. Principal Place of Business 3. Mailing Address  
 3903 CITY AVE JEFFERSON 3903 CITY AVE JEFFERSON  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 C-702 C-702

City & State City & State  
 PHILADELPHIA, PA PHILADELPHIA, PA  
 Zip Country Zip Country  
 19131 US 19131 US

4. FEI Number Applied For  
 NOT APPLICABLE  Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MAZZA-MARTINEZ, TANIA A  
 780 NW 42 AVENUE, SUITE 420  
 MIAMI, FL 33128

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

Amended AR is \$61.25  
 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	UZBELGER, DANIEL	
STREET ADDRESS	3902 CITY AVENUE ADAMS # B 1013	
CITY-ST-ZIP	PHILADELPHIA, PA 19131	
TITLE	D	<input type="checkbox"/> Delete
NAME	VIACABA, ASTRID	
STREET ADDRESS	3902 CITY AVENUE ADAMS # B 1013	
CITY-ST-ZIP	PHILADELPHIA, PA 19131	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIEL UZBELGER	
STREET ADDRESS	3903 CITY AVE JEFFERSON # C-702	
CITY-ST-ZIP	PHILADELPHIA, PA 19131 US	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASTRID VIACABA	
STREET ADDRESS	3903 CITY AVE JEFFERSON # C-702	
CITY-ST-ZIP	PHILADELPHIA, PA 19131, US	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 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.

SIGNATURE: Daniel Uzbelger DANIEL UZBELGER 1/2/05 (215) 4525592  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #