2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046323

Entity Name: CNCIS, INC.

FILED May 03, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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13818 SW 28 ST 11870 STATE ROAD 84 MIRAMAR, FL 33027

SUITE C6

DAVIE, FL 33325

Current Mailing Address: New Mailing Address:

PO BOX 550248 13818 SW 28 ST

MIRAMAR, FL 33027 FT. LAUDERDALE, FL 33355

FEI Number: 20-0888270 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:

OROZCO, OSWALDO SALZMAN, KENNETH 13818 SW 28 ST 11870 STATE ROAD 84 SUITE C6

MIRAMAR, FL 33027 US DAVIE, FL 33325

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: KENNETH SALZMAN 05/03/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

OROZCO, OSWALDO SALZMAN, KENNETH Name: Name: 13818 SW 28 ST 11870 STATE ROAD 84 SUITE C6 Address: Address:

City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: **DAVIE, FL 33325**

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

OROZCO, OSWALDO Name: Name:

Address: 11870 STATE ROAD 84 SUITE C6 Address:

DAVIE, FL 33325 City-St-Zip: City-St-Zip:

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

Name: SCANLON, SHANE Name:

Address: 11870 STATE ROAD 84 SUITE C6 Address

City-St-Zip: City-St-Zip: **DAVIE, FL 33325**

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 Statutés. 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: KENNETH SALZMAN V.P. 05/03/2005