

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000054856

FILED  
Sep 21, 2004  
Secretary of State

Entity Name: GLOBAL INFORMATION TECHNOLOGY, INC.

## Current Principal Place of Business:

15310 AMBERLY DR. SUITE 165  
TAMPA, FL 33647 US

## New Principal Place of Business:

8913 REGENTS PARK DR.  
SUITE 680  
TAMPA, FL 33647 US

## Current Mailing Address:

15310 AMBERLY DR. SUITE 165  
TAMPA, FL 33647 US

## New Mailing Address:

8913 REGENTS PARK DR.  
SUITE 680  
TAMPA, FL 33647 US

FEI Number: 59-3323942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

AJJARAPU, JANAKIRAM  
9120 ROCKROSE DR.  
TAMPA, FL 33647 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: JANAKIRAM AJJARAPU

09/21/2004

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:

Title: D (X) Delete  
Name: SHINDE, SUBRAO P  
Address: 9120 ROCK ROSE DR  
City-St-Zip: TAMPA, FL 33647

Title: DVST ( ) Delete  
Name: AJJARAPU, SURENDRA K  
Address: 8604 BUTTON BUSH CT.  
City-St-Zip: TAMPA, FL 33647

Title: PCST ( ) Delete  
Name: AJJARAPU, JANAKIRAM  
Address: 9120 ROCK ROSE DRIVE  
City-St-Zip: TAMPA, FL 33647

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
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: JANAKIRAM AJJARAPU

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09/21/2004

Electronic Signature of Signing Officer or Director

Date