2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000014899

Entity Name: 3-D INSPECTION SYSTEMS, INC.

FILED Jaņ 22, 2<u>004</u> Secretary of State

	Current Princip	al Place of Business:	New Princi	pal Place of Busin	ness
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1705 COLONIAL BLVD STE A-4 3979 NORTHSIDE CIRCLE FT MYERS, FL 33907

SUITE 1

FT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

1705 COLONIAL BLVD STE A-4 3979 NORTHSIDE CIRCLE FT MYERS, FL 33907 SUITE 1

FT MYERS, FL 33903

FEI Number: 65-0901317 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:

ROBISON, LINDA R 6450 PINE AVE

SANIBEL, FL 33957 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

FOWLER, CARL FOWLER, CARL Name: Name:

1705 COLONIAL BLVD #A-4 3979 NORTHSIDE CIRCLE, SUITE 1 Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33903

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

CUBBAGE, CHARLES Name: CUBBAGE, CHARLES Name:

1705 COLONIAL BLVD STE A-4 3979 NORTHSIDE CIRCLE, SUITE 1 Address: Address: FORT MYERS, FL 33903

FORT MYERS, FL 33907 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete FOWLER, CATHERINE Name: FOWLER, CATHERINE Name:

1705 COLONAIL BLVD A-4 3979 NORTHSIDE CIRCLE, SUITE 1 Address: Address:

City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33903

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.

Ρ SIGNATURE: CARL C. FOWLER 01/22/2004