2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000715

Address:

123 N.W. 13 ST. #206

City-St-Zip: BOCA RATON, FL 33432

Entity Name: SECNAP NETWORK SECURITY CORPORATION

FILED Mar 24, 2005 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
123 N.W. 13 ST, #206 BOCA RATON, FL 33432			#206	6421 CONGRESS AVENUE #206 BOCA RATON, FL 33487 US		
Current Mailing Address:			New Maili	New Mailing Address:		
123 N.W. 13 ST, #206 BOCA RATON, FL 33432			6421 CON	6421 CONGRESS AVENUE		
			#206 BOCA RA	#206 BOCA RATON, FL 33487 US		
FEI Number	: 20-0391516	FEI Number Applied For ()	FEI Number Not App	elicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
C/O ATKIN 1946 TYLE HOLLYWO	ER ST DOD, FL 33020	STONE, ET AL 04517 US	ournose of changing	ite registered off	ico or registered agent, or both	
	e of Florida.	submits this statement for the p	ourpose or changing	its registered on	ice or registered agent, or both,	
SIGNATUI						
	Electron	ic Signature of Registered Age	ent		Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	DCEO () SCHEIDELL, M 123 N.W. 13 ST BOCA RATON,	⁻ , #206	Title: Name: Address: City-St-Zip:	COB (X) C SCHEIDELL, MIC 6421 CONGRESS BOCA RATON, FI	S AVENUE, #206	
Title: Name: Address: City-St-Zip:	D () DELGADO, GUI 3664 COCO LA COCONUT CRE	KE DR	Title: Name: Address: City-St-Zip:	D (X) (DELGADO, GUID 3664 COCO LAK COCONUT CREE	E DR	
Title: Name: Address: City-St-Zip:	CFO () SANDO, ROBE 123 N.W. 13 ST BOCA RATON,	T, #206	Title: Name: Address: City-St-Zip:	CEO (X) C ROSENBERG, C 6421 CONGRES BOCA RATON, F	S AVENUE, #206	
Title: Name: Address: City-St-Zip:	ST () MANDO, ROBE 123 N.W. 13 ST BOCA RATON,	⁻ , #206	Title: Name: Address: City-St-Zip:	D (X) C BATES, ELIZABE 6421 CONGRESS BOCA RATON, FI	S AVENUE, #206	
Title: Name:	D (X) RENARD, OLIV	Delete ER	Title: Name:	() (Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CARL P. ROSENBERG CEO 03/24/2005