2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001620

Entity Name: EXACTUS, INC.

FILED Mar 10, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

20283 STATE ROAD 7, SUITE 300 20283 STATE ROAD 7 BOCA RATON, FL 33498

SUITE 300

BOCA RATON, FL 33498

Current Mailing Address: New Mailing Address:

20283 STATE ROAD 7, SUITE 300 20283 STATE ROAD 7. BOCA RATON, FL 33498

SUITE 300

BOCA RATON, FL 33498

FEI Number: 94-3278490 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:

PALFENIER, JERRY PALFENIER, JERRY D 21669 FALL RIVER DR. 21669 FALL RIVER DR.

BOCA RATON, FL 33428 US BOCA RATON, FL 33428 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: JERRY D. PALFENIER 03/10/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

PALFENIER, JERRY PALFENIER, JERRY D Name: Name: 21669 FALL RIVER DR. 21669 FALL RIVER DR. Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428

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

Name: PALFENIER, DAVID Name: PALFENIER, DAVID A RUA SANHARO 530, 05611-060 1604 CLIFFVIEW DR. Address: Address: SAO PAULO, SP BRAZIL, PLANO, TX 75093 City-St-Zip: City-St-Zip:

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

PALFENIER, RON PALFENIER, RONALD A Name: Name: 18022 CHICKAREE DR. 18022 CHICKAREE DR. Address: Address: City-St-Zip: OREGON CITY, OR 97045 City-St-Zip: OREGON CITY, OR 97045

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: JERRY D. PALFENIER CP 03/10/2004