2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004928

Entity Name: COVARITY, INC.

FILED Jul 18, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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 100 SE 2ND STREET
 100 SE SECOND STREET

 SUITE 2610
 SUITE 2610

 MIAMI, FL 33131
 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

 100 SE 2ND STREET
 100 SE SECOND STREET

 SUITE 2610
 SUITE 2610

 MIAMI, FL 33131
 MIAMI, FL 33131

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLOBAL EXPANSION & CONSULTING, LLC

100 SE 2ND STREET

SUITE 2610

MIAMI, FL 33131 US

GLOBAL EXPANSION & CONSULTING, LLC

100 SE SECOND STREET

SUITE 2610

MIAMI, FL 33131 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: ALEXANDER REUS 07/18/2005

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: COB () Delete Title: () Change () Addition Name: SHUTTLEWORTH, RON Name:

Address: 12 ADELPHA DRIVE Address: City-St-Zip: TORONTO, ON M8Z3A2 CA City-St-Zip:

Title: D () Delete Title: () Change () Addition
Name: ADELL SIMON Name:

 Name:
 ADELL, SIMON
 Name:

 Address:
 58 ROY STREET
 Address:

 City-St-Zip:
 RICHMOND HILL, ON L4S2R3 CA
 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: RON SHUTTLEWORTH COB 07/18/2005