2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 18, 2005 8:00 am Secretary of State 03-18-2005 90059 007 ***150 00 DOCUMENT # F04000002647 1. Entity Name INTERNATIONAL TECHNIDYNE CORPORATION Principal Place of Business Mailing Address **8 OLSEN AVENUE 8 OLSEN AVENUE** EDISON, NJ 08820 **EDISON, NJ 08820** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122005 Chg-P CR2E034 (10/03) City & State 4. FEI Number City & State Applied For 22-1894953 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required -- 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Election Campaign Supplies Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete TITLE TITLE ☐ Addition NAME BOYLSTON, M. WAYNE NAME 6035 STONERIDGE DRIVE STREET ADDRESS STREET ADDRESS PLEASANTON, CA 94588 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition GROSSMAN, D. KEITH NAME NAME 6035 STONERIDGE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLEASANTON, CA 94588 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME LEHMAN, DAVID NAME STREET ADDRESS 6035 STONERIDGE DRIVE STREET ADDRESS PLEASANTON, CA 94588 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Addition TITLE COHEN, LARRY NAME 330 Talmadge Road STREET ADDRESS **6 OLSEN AVENUE** STREET ADDRESS Édison, NJ 08817 CITY-ST-ZIP **EDISON, NJ 08820** CITY-ST-ZIP Delete ☐ Addition TITLE TITLE . . WARD, STEVE NAME NAME 8 OLSEN AVENUE STREET ADDRESS STREET ADDRESS EDISON NJ 08820 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE NAME 4 15 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED