2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004
Secretary of State

DOCUMENT# F98000006190

Entity Name: PARALOGIC HOLDING CORPORATION

Current Principal Place of Business:

7800 SOUTHLAND BLVD
STE 250
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

7800 SOUTHLAND BLVD
STE 250
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 04-3438383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIL WILSON
TERANEX, INC
7800 SOUTHLAND BLVD SUITE 250
ORLANDO, FL 32809

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete
Name: DEFEO, ROBERT
Address: 7800 SOUTHLAND BLVD, SUITE 250
City-St-Zip: ORLANDO, FL 32809

Title: V ( ) Delete
Name: KAHANI, DAVID
Address: 7800 SOUTHLAND BLVD, SUITE 250
City-St-Zip: ORLANDO, FL 32809

Title: V ( ) Delete
Name: LEISING, JANET
Address: 7800 SOUTHLAND BLVD, SUITE 250
City-St-Zip: ORLANDO, FL 32809

Title: C ( ) Delete
Name: WILSON, GIL
Address: 7800 SOUTH LAND BLVD. SUITE 250
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: GIL WILSON C 03/08/2004

Electronic Signature of Signing Officer or Director Date