

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J70338

Entity Name: TECHNIFAX, INC.

FILED
Dec 23, 2004
Secretary of State**Current Principal Place of Business:**300 31ST ST N
#335
ST. PETERSBURG, FL 33713**New Principal Place of Business:****Current Mailing Address:**300 31ST ST N
#335
ST. PETERSBURG, FL 33713**New Mailing Address:**

FEI Number: 59-2907248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:VISORIA, FRANCO
300 31ST STREET NORTH
STE 339
SAINT PETERSBURG, FL 33713 US**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

OFFICERS AND DIRECTORS:Title: CEO () Delete
Name: ALDERMAN, VICTOR
Address: 300 31ST STREET N STE 335
City-St-Zip: SAINT PETERSBURG, FL 33713Title: P () Delete
Name: VISORIA, FRANCO
Address: 300 31ST STREET N STE 335
City-St-Zip: SAINT PETERSBURG, FL 33713Title: S () Delete
Name: SAKSER, KEVIN J
Address: 14010 CLUBHOUSE CIRCLE STE 1007
City-St-Zip: TAMPA, FL 33624Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P/D (X) Change () Addition
Name: ALDERMAN, VICTOR
Address: 300 31ST STREET N STE 335
City-St-Zip: SAINT PETERSBURG, FL 33713Title: S (X) Change () Addition
Name: HANSELL, HARRISON
Address: 5608 26TH AVE S
City-St-Zip: GULFPORT, FL 33707Title: T (X) Change () Addition
Name: ALDERMAN, SARAH J
Address: 5263 3RD AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710Title: DIR () Change (X) Addition
Name: DICKSON, JEFFREY
Address: HOMEPOR DR
City-St-Zip: PALM HARBOR, FL 34683Title: COB () Change (X) Addition
Name: VISORIA, TRANQUILINO V JR
Address: 29513 ALLEGRO DR
City-St-Zip: TAMPA, FL 33543Title: DIR () Change (X) Addition
Name: DIPOLLINA, TONY
Address: 500 NORTH WESTSHORE BLVD., SUITE 300
City-St-Zip: TAMPA, FL 33609

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: VICTOR L. ALDERMAN

P/D

12/23/2004

Electronic Signature of Signing Officer or Director

Date