

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L69780

Entity Name: INTELETEK, INC.

FILED
May 02, 2004
Secretary of State

Current Principal Place of Business:

3195 N POWERLINE
SUITE 112
POMPANO BCH, FL 33069 US

Current Mailing Address:

3195 N POWERLINE
SUITE 112
POMPANO BCH, FL 33069 US

New Principal Place of Business:

3195 N POWERLINE ROAD
SUITE 112
POMPANO BCH, FL 33069 US

New Mailing Address:

3195 N POWERLINE ROAD
SUITE 112
POMPANO BCH, FL 33069 US

FEI Number: 65-0251568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STYLES, BRIAN J
3195 N POWERLINE RD
SUITE 112
POMPANO BCH, FL 33069

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

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:

Title: PST () Delete
Name: STYLES, BRIAN J.,
Address: 2000 NW 34TH AVE
City-St-Zip: COCONUT CREEK, FL 33066

Title: D () Delete
Name: STYLES, BRIAN J.,
Address: 2000 NW 34TH AVE
City-St-Zip: COCONUT CREEK, FL 33066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: STYLES, BRIAN J.,
Address: 662 BOCA MARINA COURT
City-St-Zip: BOCA RATON, FL 33487

Title: D (X) Change () Addition
Name: STYLES, BRIAN J.,
Address: 662 BOCA MARINA COURT
City-St-Zip: BOCA RATON, FL 33487

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: BRIAN J STYLES

P

05/02/2004

Electronic Signature of Signing Officer or Director

Date