

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028047

FILED
Apr 13, 2004
Secretary of State

Entity Name: BUSINESS TECHNOLOGY EXPERTS, INC.

Current Principal Place of Business:

2890 GRIFFIN ROAD
SUITE 5
DANIA BEACH, FL 33312

New Principal Place of Business:

2890 GRIFFIN ROAD
SUITE 5
FORT LAUDERDALE, FL 33312

Current Mailing Address:

2890 GRIFFIN ROAD
SUITE 5
DANIA BEACH, FL 33312

New Mailing Address:

2890 GRIFFIN ROAD
SUITE 5
FORT LAUDERDALE, FL 33312

FEI Number: 65-0992240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISSMAN, HAROLD
1776 NORTH PINE ISLAND ROAD
SUITE 118
PLANTATION, FL 33322 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: OMARA, HILDEGARD
Address: 9719 NW 16TH CT
City-St-Zip: PEMBROKE PINES, FL 33024

Title: P () Delete
Name: OMARA, MICHAEL
Address: 8105 S.W. 21ST CT.
City-St-Zip: DAVIE, FL 33324

Title: VP () Delete
Name: ROLLER, DANIEL B
Address: 8105 S.W. 21ST CT.
City-St-Zip: DAVIE, FL 33324

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:

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: MICHAEL OMARA

P

04/13/2004

Electronic Signature of Signing Officer or Director

Date