## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICE

## Mar 06, 2004 08:00 AM **DOCUMENT # P00000042871 Secretary of State** COLLABORATIVE TECHNOLOGIES, INC. Principal Place of Business Mailing Address 1331 GRAND CAYMAN DR 1331 GRAND CAYMAN DR MERRITT ISLAND, FL 32952 MERRITT ISLAND, FL 32952 03032004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3656519 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MULLIGAN, KAREN DO NOT WRITE 1331 GRAND CAYMAN DR MERRITT ISLAND, FL 32952 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000079190 03/08/04-80056-005 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. מ TITLE MULLIGAN, KAREN NAME STREET ADDRESS 1331 GRAND CAYMAN DR MERRITT ISLAND, FL 32952 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CATY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS. CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

OR DIRECTOR

FILED