

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000109332

FILED
Jun 17, 2005
Secretary of State

Entity Name: CONNECTED WORLD INTERNET VENTURES, INC.

Current Principal Place of Business:

6605 SE 221ST
P O BOX 2001
HAWTHORNE, FL 32640

New Principal Place of Business:

Current Mailing Address:

PO DRAWER 2759
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-3698779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALZMAN, ANTHONY J
MOODY & SALZMAN, P.A.
500 E. UNIVERSITY AVE., STE. A
GAINESVILLE, FL 326022759 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: D () Delete
Name: GARLITZ, JAY
Address: PO BOX 1333
City-St-Zip: HAWTHORNE, FL 32640

Title: D () Delete
Name: GARLITZ, DUSTIN
Address: 22829 SE 63RD PL
City-St-Zip: HAWTHORNE, FL 32640

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: GARLITZ, JAY
Address: PO BOX 1333
City-St-Zip: HAWTHORNE, FL 32640

Title: VP (X) Change () Addition
Name: GARLITZ, DUSTIN
Address: 22829 SE 63RD PL
City-St-Zip: HAWTHORNE, FL 32640

Title: VP () Change (X) Addition
Name: GARLITZ, JANINE
Address: 22829 SE 63RD PL
City-St-Zip: HAWTHORNE, FL 32640

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: JAY GARLITZ

D

06/17/2005

Electronic Signature of Signing Officer or Director

Date