2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012224

Entity Name: ZIPHEX CONSULTING, INC.

PEMBROKE PINES, FL 33331

City-St-Zip:

FILED Mar 31, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5405 NW 102 AVE. SUITE 201 SUNRISE, FL 33351 **New Mailing Address: Current Mailing Address:** 5405 NW 102 AVE. SUITE 201 SUNRISE, FL 33351 FEI Number: 65-1072905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIBERMAN, LEA 2699 STIRLING ROAD SUITE A-305 FT. LAUDERDALE, FL 33312 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: () Change () Addition BONI, LOUIS A JR. Name: Name: 11859 N.W. 27 STREET Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: () Delete Title: VPTD Title: () Change () Addition Name: LIBERMAN, AMIR Name: 7049 MARIPOSA CIRCLE WEST Address: 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: LOUIS A BONI JR. **PSD** 03/31/2004