2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000040885

Entity Name: NETWORKING TECHNOLOGY, INC.

FILED Apr 16, 2003 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2430 SHADOWLAWN DRIVE SUITE 11 NAPLES, FL 341124801 US

Current Mailing Address: New Mailing Address:

551 LAVERS CIRCLE 560 LAVERS CIRCLE APT. 276 APT. 247

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 US

FEI Number: 65-1108441 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:

RAPHAEL, ANDREAS
551 LAVERS CIRCLE
APT. 276

RAPHAEL, ANDREAS
560 LAVERS CIRCLE
APT. 247

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 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: 04/16/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: RAPHAEL, ANDREAS
Address: 551 LAVERS CIRCLE, APT. 276

Address: 551 LAVERS CIRCLE, APT. 276 City-St-Zip: DELRAY BEACH, FL 33444 US

 Title:
 V
 () Delete

 Name:
 BARBIERI, CLYDE A

 Address:
 963 LAKE WYMAN ROAD

 City-St-Zip:
 BOCA RATON, FL 33431 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition

 Name:
 RAPHAEL, ANDREAS

 Address:
 560 LAVERS CIRCLE, APT. 247

 City-St-Zip:
 DELRAY BEACH, FL 33444 US

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: ANDREAS RAPHAEL PT 04/16/2003