

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076097

Entity Name: EMTAC, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

3976 GROVE PARK DRIVE
TALLAHASSEE, FL 323111

New Principal Place of Business:

Current Mailing Address:

PO BOX 3208
TALLAHASSEE, FL 323153208

New Mailing Address:

FEI Number: 65-1127082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIFFER, GIL
3976 GROVE PARK DRIVE
TALLAHASSEE, FL 32311 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: D () Delete
Name: WARREN, RICHARD
Address: 717 W 7 STREET
City-St-Zip: OTTAWA, KS 66067

Title: P () Delete
Name: LIFSHITZ, FIMA
Address: 1040 ALSTON ROAD
City-St-Zip: SANTA BARBARA, CA 93108

Title: V () Delete
Name: RISING, RUSSELL
Address: 514 SANTANDER APT. 5
City-St-Zip: CORAL SPRINGS, FL 33134

Title: ST () Delete
Name: LIFSHITZ, JERE
Address: 1040 ALSTON ROAD
City-St-Zip: SANTA BARBARA, CA 93108

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:

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: JERE LIFSHITZ

ST

04/28/2004

Electronic Signature of Signing Officer or Director

Date