

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000079098

FILED
Jan 20, 2004
Secretary of State

Entity Name: SOFTVISION TECHNOLOGIES INC.,

Current Principal Place of Business:

1889 S KIRKMAN RD #627
ORLANDO, FL 32811

New Principal Place of Business:

11520 DELWICK DR
WINDERMERE, FL 34786

Current Mailing Address:

PO BOX 1816
WINDERMERE, FL 347861816

New Mailing Address:

FEI Number: 59-3744492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOHAN, NIDAMARTI S.K.
1889 S KIRKMAN RD #627
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

MOHAN, NIDAMARTI S.K.
11520 DELWICK DR
WINDERMERE, FL 34786 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

01/20/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOHAN, NIDMARTI S.K.
Address: 1889 S KIRKMAN RD #627
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOHAN, NIDMARTI S.K.
Address: 11520 DELWICK DR
City-St-Zip: WINDERMERE, FL 34786

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: NIDAMARTI MOHAN

P

01/20/2004

Electronic Signature of Signing Officer or Director

Date