2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004
Secretary of State

DOCUMENT# P01000099593

Entity Name: ELOGIC GP, INC.

Current Principal Place of Business:

4893 WEST WATERS AVE., SUITE E
TAMPA, FL 33634

New Principal Place of Business:

8184 WOODLAND CENTER BLVD
TAMPA, FL 33614

Current Mailing Address:

4893 WEST WATERS AVE., SUITE E
TAMPA, FL 33634

New Mailing Address:

8184 WOODLAND CENTER BLVD
TAMPA, FL 33614

FEI Number: 59-3748552 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLASKAY, NICHOLAS
4893 W WATERS AVE, STE E
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

FLASKAY, NICHOLAS
8184 WOODLAND CENTER BLVD
TAMPA, FL 33614 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: NICHOLAS FLASKAY 02/12/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FLASKAY, NICHOLAS
Address: 4893 W. WATERS AVE STE E
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: PERTTUNEN, DAVID
Address: 4893 W WATERS AVE STE E
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FLASKAY, NICHOLAS
Address: 8184 WOODLAND CENTER BLVD
City-St-Zip: TAMPA, FL 33614

Title: D (X) Change ( ) Addition
Name: PERTTUNEN, DAVID
Address: 8184 WOODLAND CENTER BLVD
City-St-Zip: TAMPA, FL 33614

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: NICHOLAS FLASKAY MR 02/12/2004
Electronic Signature of Signing Officer or Director Date