

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116611

FILED
Jul 13, 2004
Secretary of State

Entity Name: HIVELOCITY VENTURES CORPORATION

Current Principal Place of Business:

475 CENTRAL AVE
B-100
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

400 N TAMPA ST
SUITE 1010
TAMPA, FL 33602 US

Current Mailing Address:

475 CENTRAL AVE
B-100
ST. PETERSBURG, FL 33701 US

New Mailing Address:

400 N TAMPA ST
SUITE 1010
TAMPA, FL 33602 US

FEI Number: 36-4484945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUJU, MICHAEL J
31564 US HWY 19 N
PALM HARBOR, FL 34684 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LINTON, BEN
Address: 475 CENTRAL AVE B 100
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LINTON, BEN
Address: 400 N TAMPA ST STE 1010
City-St-Zip: TAMPA, FL 33602

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: BEN LINTON

P

07/13/2004

Electronic Signature of Signing Officer or Director

Date