

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011172

FILED
Jan 11, 2004
Secretary of State

Entity Name: AGRICULTURE & SYSTEMS INTEGRATORS INC.

Current Principal Place of Business:

61 ALAFAYA WOODS BLVD #181
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

61 ALAFAYA WOODS BLVD #181
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 01-0588657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASHEF, OWRANG
61 ALAFAYA WOODS BLVD #181
OVIEDO, FL 32765

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: PD () Delete
Name: KASHEF, OWRANG
Address: 61 ALAFAYA WOODS BLVD #181
City-St-Zip: OVIEDO, FL 32765

Title: VD () Delete
Name: KASHEF, OWRANG
Address: 61 ALAFAYA WOODS BLVD #181
City-St-Zip: OVIEDO, FL 32765

Title: VD () Delete
Name: KASHEF, FELOR
Address: 61 ALAFAYA WOODS BLVD #181
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KASHEF, OWRANG
Address: 61 ALAFAYA WOODS BLVD #181
City-St-Zip: OVIEDO, FL 32765

Title: V (X) Change () Addition
Name: KASHEF, OWRANG
Address: 61 ALAFAYA WOODS BLVD #181
City-St-Zip: OVIEDO, FL 32765

Title: CFO (X) Change () Addition
Name: KASHEF, FELOR
Address: 61 ALAFAYA WOODS BLVD #181
City-St-Zip: OVIEDO, FL 32765

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: OWRANG KASHEF

P

01/11/2004

Electronic Signature of Signing Officer or Director

Date