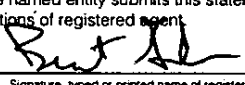
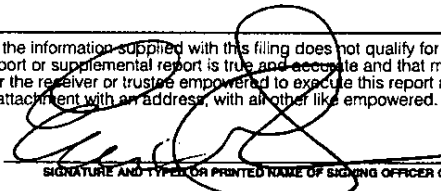


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90255 013 ***158.75

DOCUMENT # P02000053400 1. Entity Name ESCAPE VELOCITY SYSTEMS, INC.					
Principal Place of Business 3335 CASTLE PEAK AVE SUPERIOR, CO 80027			Mailing Address 3335 CASTLE PEAK AVE SUPERIOR, CO 80027		
2. Principal Place of Business 4730 Table Mesa Dr. Suite, Apt. #, etc. I-200		3. Mailing Address 4730 Table Mesa Dr. Suite, Apt. #, etc. I-200			
City & State Boulder CO		City & State Boulder CO		4. FEI Number 01-0662129	
Zip 80305		Country USA		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARBER, EVAN 10717 AYRSHIRE DR TAMPA, FL 33626			7. Name and Address of New Registered Agent Name Brant Garber Street Address (P.O. Box Number is Not Acceptable) 14312 Kellingrew Place City Tampa FL Zip Code 33624		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Brant Garber Financial Advisor 4-18-05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete GARBER, EVAN 10717 AYRSHIRE DR TAMPA, FL 33626		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition D Evan Garber 2501 Vine Place Boulder CO 80304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete BROWN, NATHANIEL 21930 OCEAN PINES DR LAND O'LAKES, FL 34639		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition D Nathaniel Brown 3335 Castle Peak Ave Superior CO 80027	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.					
SIGNATURE:  Evan Garber SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4-19-05 303 494 1765 Date Daytime Phone #		

20044000



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