

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055433

FILED
Jan 09, 2004
Secretary of State

Entity Name: T2IMPACT PUBLICATIONS, INC.

Current Principal Place of Business:

5493 BAYWATER DRIVE
TAMPA, FL 33615

New Principal Place of Business:

6115 GALLEON WAY
TAMPA, FL 33615

Current Mailing Address:

5493 BAYWATER DRIVE
TAMPA, FL 33615

New Mailing Address:

6115 GALLEON WAY
TAMPA, FL 33615

FEI Number: 01-0711860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZGERALD, CHICKE
5493 BAYWATER DRIVE
TAMPA, FL 33615

Name and Address of New Registered Agent:

FITZGERALD, CHICKE
6115 GALLEON WAY
TAMPA, FL 33615

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

01/09/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FITZGERALD, MICHAEL
Address: 5493 BAYWATER DRIVE
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: FITZGERALD, CHICKE
Address: 5493 BAYWATER DRIVE
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FITZGERALD, MICHAEL
Address: 6115 GALLEON WAY
City-St-Zip: TAMPA, FL 33615

Title: D (X) Change () Addition
Name: FITZGERALD, CHICKE
Address: 6115 GALLEON WAY
City-St-Zip: TAMPA, FL 33615

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: MICHAEL FITZGERALD

D

01/09/2004

Electronic Signature of Signing Officer or Director

Date