


**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000082468

1. Entity Name
FMD CAPITAL TECHNOLOGIES, INC.



Principal Place of Business
 3450 PALENCIA DRIVE
 STE 1412
 TAMPA, FL 33618

Mailing Address
 3450 PALENCIA DRIVE
 STE 1412
 TAMPA, FL 33618

55045840



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
 Zip Country

4. FEI Number
 20-0000623

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
VILLANI, FREDERICK P
3450 PALENCIA DRIVE
STE 1412
TAMPA, FL 33618

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature accepted when registering)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D,P	VILLANI, FREDERICK P	3450 PALENCIA DRIVE STE 1412	TAMPA, FL 33618	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PRESIDENT	JOHN E. MARSH	8628 CHADWICK DR	TAMPA, FL 33635	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V.P. OPERATIONS	TIMOTHY L. RUSH	8310 DENMARK ST #50	CLEARWATER, FL 33763	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V.P. FINANCE	FRED P. VILLANI	3450 PALENCIA DR - STE 1412	TAMPA, FL 33618	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John E. Marsh **JOHN E. MARSH** 4/29/03 (813) 505-3041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Cayman Phone #

CR2E034 (10/02)