2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106019

Entity Name: NETSIRK TECHNOLOGIES INC.

FILED Jan 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1775 LAKESHORE CIRCLE WESTON, FL 33326

Current Mailing Address: New Mailing Address:

1775 LAKESHORE CIRCLE WESTON, FL 33326

FEI Number: 76-0715185 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FAISON, QUINCY S FAISON, KRISTEN A 1775 LAKESHORE CIRCLE 1775 LAKESHORE CIRCLE WESTON, FL 33326 WESTON, FL 33326

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: KRISTEN A. FAISON 01/19/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: **PRFS** (X) Change () Addition FAISON, QUINCY S Name: Name: FAISON, KRISTEN A 1775 LAKESHORE CIRCLE 1775 LAKESHORE CIRCLE Address: Address: City-St-Zip: WESTON, FL 33326 US City-St-Zip: WESTON, FL 33326 US

Title: VΡ Title: (X) Change () Addition () Delete

Name: FAISON, KRISTEN A Name: FAISON, DOUGLAS R 1775 LAKESHORE CIRCLE 2275 CHIPPEWA DRIVE Address: Address: WESTON, FL 33326 US RIVERDALE, FL 30296 US City-St-Zip: City-St-Zip:

D () Change (X) Addition OVERTURF, JARAD M Title: Title: () Delete

Name: Name: 1927 CLEVELAND AVENUE Address: Address: City-St-Zip: City-St-Zip: WEST LAWN, PA 19609

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: KRISTEN FAISON **PRES** 01/19/2004