

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033755

FILED
Apr 30, 2004
Secretary of State

Entity Name: NEMESIS COMMUNICATION TECHNOLOGIES, INC.

Current Principal Place of Business:

6555 NORTH POWERLINE ROAD
SUITE 313
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

6555 NORTH POWERLINE ROAD
SUITE 313
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 90-0068973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: D () Delete
Name: REIS, JASON
Address: 6428 FRENCH ANGEL TERRACE
City-St-Zip: MARGATE, FL 33063 US

Title: D () Delete
Name: REEHER, RANDY
Address: 1901 NW 34TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33066 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JASON REIS

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date