

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036622

Entity Name: DS TECHNOLOGY, INC.

FILED
Mar 04, 2004
Secretary of State

Current Principal Place of Business:

2025 ERVING CIRCLE APT# 4304
OCOE, FL 34761

New Principal Place of Business:

233 CURTIS AVE
GROVELAND, FL 34736

Current Mailing Address:

2025 ERVING CIRCLE APT# 4304
OCOE, FL 34761

New Mailing Address:

PO BOX 580551
ORLANDO, FL 32858

FEI Number: 05-0563658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARPE, DANE
2025 ERVING CIRCLE APT# 4304
OCOE, FL 34761

Name and Address of New Registered Agent:

SHARPE, DANE
233 CURTIS AVE
GROVELAND, FL 34736

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: DANE SHARPE

03/04/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SHARPE, DANE
Address: 2025 ERVING CIRCLE APT# 4304
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SHARPE, DANE
Address: PO BOX 580551
City-St-Zip: ORLANDO, FL 32858

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: DANE SHARPE

DP

03/04/2004

Electronic Signature of Signing Officer or Director

Date