

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000043014

FILED
Feb 17, 2004
Secretary of State

Entity Name: DUVERNE TECHNOLOGY SOLUTIONS, INC.

Current Principal Place of Business:

13150 MEMORIAL HWY #2V
MIAMI, FL 33161

New Principal Place of Business:

13150 MEMORIAL HWY
2L
MIAMI, FL 33161

Current Mailing Address:

13150 MEMORIAL HWY #2V
MIAMI, FL 33161

New Mailing Address:

PO BOX 381634
MIAMI, FL 33238

FEI Number: 51-0458397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUVERNE, PHARES
13150 MEMORIAL HWY #2V
MIAMI, FL 33161

Name and Address of New Registered Agent:

DUVERNE, PHARES
13150 MEMORIAL HWY
2L
MIAMI, FL 33161

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: PHARES DUVERNE

02/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DUVERNE, PHARES
Address: 13150 MEMORIAL HWY #2V
City-St-Zip: MIAMI, FL 33161

Title: DV () Delete
Name: DUVERNE, JOSETTE F
Address: 13150 MEMORIAL HWY #2V
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DUVERNE, PHARES
Address: 13150 MEMORIAL HWY #2L
City-St-Zip: MIAMI, FL 33161

Title: DV (X) Change () Addition
Name: DUVERNE, JOSETTE F
Address: 13150 MEMORIAL HWY #2L
City-St-Zip: MIAMI, FL 33161

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: PHARES DUVERNE

PRES

02/17/2004

Electronic Signature of Signing Officer or Director

Date