2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2004
Secretary of State

DOCUMENT# P03000066365

Entity Name: SPECTRAPATH TECHNOLOGIES, INC,

Current Principal Place of Business:

911 NW 85TH TERRACE
APT 1305
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

911 NW 85TH TERRACE
APT 1305
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 57-1172639 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANPOLAT, MURAT
911 NW 85TH TERRACE
APT 1305
PLANTATION, FL 33324 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: P ( ) Delete
Name: CANPOLAT, MURAT
Address: 911 NW 85TH TERRACE , APT 1305
City-St-Zip: PLANTATION, FL 33324

Title: V ( ) Delete
Name: DEMIR, UMIT D
Address: 9616 NW 7TH CIRCULE APT 1621
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete
Name: STEPHEN, DUNN M
Address: 15652 SW 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: DAUPHINEE, MICHAEL J
Address: 400 N. HIATUS ROAD, SUITE 203
City-St-Zip: PEMBROKE PINES, FL 33026

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: MURAT CANPOLAT P 03/15/2004

Electronic Signature of Signing Officer or Director — Date