2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075427

Entity Name: CELEBRATION TECHNOLOGY CORP.

FILED Jan 13, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1154 CELEBRATION AVENUE 1154 CELEBRATION AVENUE CELEBRATION, FL 34747 US

Current Mailing Address: New Mailing Address:

1154 CELEBRATION AVENUE CELEBRATION, FL 34747 1154 CELEBRATION, FL 34747 US

FEI Number: 20-0083499 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:

BUSINESS FILINGS INCORPORATED 660 EAST JEFFERSON STREET TALLAHASSEE, FL 32301 US SEVERINO, DARREN D MR. 1154 CELEBRATION AVENUE CELEBRATION, FL 34747 US

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: DARREN SEVERINO 01/13/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: SEVERINO, DARREN SEVERINO, DARREN D MR. Name: Name: 1154 CELEBRATION AVENUE Address: 1154 CELEBRATION AVENUE Address: City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747 US

Title: () Delete Title: VP () Change (X) Addition
Name: PATEL. SAAGAR B MR.

Address: Address: 734 HONEYSUCKLE AVENUE
City-St-Zip: City-St-Zip: CELEBRATION, FL 34747 US

Title: Title: T () Change (X) Addition

 Name:
 PORTER, RICHARD G MR.

 Address:
 Address:
 206 REDBUD STREET

 City-St-Zip:
 City-St-Zip:
 CELEBRATION, FL 34747 US

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

Name:Name:HUGHES, ALLISON H MS.Address:Address:433 WATER STREETCity-St-Zip:City-St-Zip:CELEBRATION, FL 34747 US

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: DARREN SEVERINO P 01/13/2004	4
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