

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078582

Entity Name: TOOLAGE, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

914 SW 8TH AVE
APT 46A
GAINESVILLE, FL 32601 US

Current Mailing Address:

PO BOX 1112
GAINESVILLE, FL 326011112 US

New Principal Place of Business:

300 HERONS RUN DR
APT 423
SARASOTA, FL 34232 US

New Mailing Address:

300 HERONS RUN DR
APT 423
SARASOTA, FL 34232 US

FEI Number: 20-0110356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIVA, MIHNEA G
300 HERON'S RUN DR
APT 423
SARASOTA, FL 34232 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: JIVA, MIHNEA G
Address: 300 HERON'S RUN DR
City-St-Zip: SARASOTA, FL 34232 US

Title: VP () Delete
Name: SKARIA, ARUN
Address: 1103 MONTEREY PKWY
City-St-Zip: ATLANTA, GA 30350 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: MIHNEA G JIVA

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date