2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000114671

Entity Name: CENTAUR SYSTEMS CORPORATION

FILED May 10, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

830 BAYRIDGE LANE
PORT ORANGE, FL 32127 US

5480 CARMODY LAKE DRIVE
PORT ORANGE, FL 32128 US

Current Mailing Address: New Mailing Address:

830 BAYRIDGE LANE 5480 CARMODY LAKE DRIVE PORT ORANGE, FL 32127 US PORT ORANGE, FL 32128 US

FEI Number: 20-0429886 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:

HAFNER, CHRISTINE S
830 BAYRIDGE LANE
PORT ORANGE, FL 32127 US
HAFNER, ULRIKE G
830 BAYRIDGE LANE
PORT ORANGE, FL 32127 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: ULRIKE G HAFNER 05/10/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

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

Name:HAFNER, FLORIAN BName:HAFNER, FLORIAN BAddress:830 BAYRIDGE LANEAddress:5480 CARMODY LAKE DRIVECity-St-Zip:PORT ORANGE, FL 32127 USCity-St-Zip:PORT ORANGE, FL 32128 US

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

 Name:
 HAFNER, CHRISTINE S
 Name:
 HAFNER, CHRISTINE S

 Address:
 830 BAYRIDGE LANE
 Address:
 5480 CARMODY LAKE DRIVE

City-St-Zip: PORT ORANGE, FL 32127 US City-St-Zip: PORT ORANGE, FL 32128 US

Title: VP () Delete Title: VP (X) Change () Addition Name: KHERA, VINAYAK Name: KHERA, VINAYAK

Address: 22536 AIRMONT WOODS TER Address: 17947 TOBERMORY PLACE
City-St-Zip: ASHBURN, VA 20148 US City-St-Zip: LEESBURG, VA 20175 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: CHRISTINE S HAFNER VP 05/10/2005