2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136767

Name: Address:

City-St-Zip:

301 W. BAY ST., SUITE 2360

JACKSONVILLE, FL 32202

Entity Name: TRANSTEK ADVANTAGE, INC.

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 301 WEST BAY STREET **SUITE 2360** JACKSONVILLE, FL 32202 **New Mailing Address: Current Mailing Address:** 301 WEST BAY STREET **SUITE 2360** JACKSONVILLE, FL 32202 FEI Number: 20-0464494 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: JOHNSON, JEREMY K GOODWIN, TERRI 12045 MASSIVE OAKS CT. 5506 GARDEN ARBOR DR. JACKSONVILLE, FL 32223 US LUTZ, FL 33558 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: TERRI GOODWIN 01/10/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition JOHNSON, PAM Name: Name: 301 WEST BAY STREET #2360 Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: Title: CEO () Delete () Change () Addition JOHNSON, MARV Name: Name: 301 WEST BAY STREET #2360 Address: Address: JACKSONVILLE, FL 32202 City-St-Zip: City-St-Zip: () Delete Title: Title: TRFA () Change () Addition JOHNSON, JENNIFER L TREASUR Name: Name: 301 W. BAY ST., SUITE 2360 Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: SEC () Delete Title: () Change () Addition JOHNSON, JEREMY K SECRETA

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PAMELA C. JOHNSON PD 01/10/2005