

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137853

FILED
Jul 12, 2004
Secretary of State

Entity Name: EDI CONCEPTS, INC.

Current Principal Place of Business:

4809 EHRLICH ROAD SUITE 105
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

4809 EHRLICH ROAD SUITE 105
TAMPA, FL 33624

New Mailing Address:

FEI Number: 86-1088220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADLER LAW FIRM PA
A/O ANDREW L ADLER ESQ
8909 REGENTS PARK DRIVE SUITE 420
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

JOE CASTAGNO
4809 EHRLICH ROAD SUITE 105
TAMPA, FL 33624 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: JOE CASTAGNO

07/12/2004

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: D () Delete
Name: KIENAST, SHIRLEY J
Address: 4809 EHRLICH ROAD SUITE 105
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: CASTAGNO, JOE
Address: 4809 EHRLICH ROAD SUITE 105
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: KIENAST, CURT
Address: 4809 EHRLICH ROAD SUITE 105
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CURT KIENAST

D

07/12/2004

Electronic Signature of Signing Officer or Director

Date