2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156682

Entity Name: BOCA THEATER AND AUTOMATION INC.

FILED Apr 14, 2005 Secretary of State

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

6091 NW 43 TER 9704 CLINT MOORE ROAD BOCA RATON, FL 33496 SUITE A-106

BOCA RATON, FL 33496

Current Mailing Address: New Mailing Address:

6091 NW 43 TER 9704 CLINT MOORE ROAD BOCA RATON, FL 33496 SUITE A-106 BOCA RATON, FL 33496

FEI Number: 20-0637878 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:

GALEA, JEFFREY 6091 NW 43 TER BOCA RATON, FL 33496 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GALEA, JEFFREY
 Name:

 Address:
 6091 NW 43 TER
 Address:

 City-St-Zip:
 BOCA RATON, FL 33496
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition Name: JOSEPH, GALEA T JR

Name:JOSEPH, GALEA TName:JOSEPH, GALEA T JRAddress:18827 W. WOODDALE TRAILAddress:18827 W. WOODDALE TRAILCity-St-Zip:LAKE VILLA, IL 60046 USCity-St-Zip:LAKE VILLA, IL 60046 US

Title: V () Delete Title: () Change () Addition

 Name:
 RUSSELL, JOHN M
 Name:

 Address:
 2515 GENESEE AVE
 Address:

 City-St-Zip:
 W PALM BEACH, FL 33409
 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: JOSEPH T GALEA JR T 04/14/2005