## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000012478

Entity Name: AVEGA DATA SAFE OF FLORIDA, INC.

FILED Feb 11, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	I MARCO BLVI NVILLE, FL 32			
Current N	/lailing Addre	ss:	New Mailing Address	s:
	I MARCO BLVI NVILLE, FL 32			
FEI Number	r: 65-1215003	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
1553 SAN	I, JAMES A I MARCO BLVI NVILLE, FL 32			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
Electronic Signature of Registered Age			ent	Date
Election Ca	mpaign Financin	ng Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( VON ARX, JAN 1553 SAN MAI JACKSONVILL	RCO BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP ( GIBBS, JOHN 1553 SAN MAI JACKSONVILL	RCO BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	VP ( EDEN, TIMOTI	) Delete	Title: Name:	( ) Change ( ) Addition

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: JAMES A. VON ARX PRES 02/11/2005