## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000125506

Entity Name: VERETECH, INC.

ROSSI, VINCE

BOCA RATON, FL 33432

150 E PALMETTO PARK RD.SUITE 340

Name:

Address: City-St-Zip: FILED Apr 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 150 E PALMETTO PARK ROAD SUITE 340 BOCA RATON, FL 33432 **Current Mailing Address: New Mailing Address:** 150 E PALMETTO PARK ROAD SUITE 340 BOCA RATON, FL 33432 FEI Number: 20-1589902 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: SHEIASSON, MICHAEL P SHEINSON, MICHAEL P 272 SE 5TH AVE 272 SE 5TH AVE DELRAY BEACH, FL 33483 US US DELRAY BEACH, FL 33483 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: MICHAEL P SHEINSON 04/20/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition SHEINSON, MICHAEL P Name: Name: 272 SE 5TH AVE Address: Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: MCFALL, J. MICHAEL Name: 150 E. PALMETTO PARK RD, SUITE 340 Address: Address: BOCA RATON, FL 33432 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: TSD () Change () Addition DELAURIER, ARTHUR Name: Name: 150 E. PALMETTO PARK RD, SUITE 340 Address: Address: BOCA RATON, FL 33432 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition C, GROSS I GROSS, IRWIN C Name: Name: 150 E. PALMETTO PARK BLVD, SUITE 340 Address: Address: 150 E. PALMETTO PARK BLVD, SUITE 340 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MICHAEL J MCFALL PD 04/20/2007