
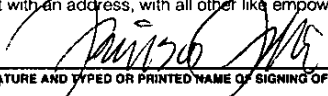


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90160 011 ***158.75

DOCUMENT # P04000143835					
1. Entity Name CRENTECH, INC.					
Principal Place of Business 2806 FALCON CREST PLACE LAKE MARY, FL 32746 US			Mailing Address 2806 FALCON CREST PLACE LAKE MARY, FL 32746 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-1826318	
				Applied For Not Applicable	
6. Name and Address of Current Registered Agent FELIX, FRANCISCO 2806 FALCON CREST PLACE LAKE MARY, FL 32746				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	DIR <input type="checkbox"/> Delete				
NAME	FELIX, FRANCISCO				
STREET ADDRESS	2806 FALCON CREST PLACE				
CITY-ST-ZIP	LAKE MARY, FL 32746				
TITLE	PRES <input type="checkbox"/> Delete				
NAME	FELIX, FRANCISCO				
STREET ADDRESS	2806 FALCON CREST PLACE				
CITY-ST-ZIP	LAKE MARY, FL 32746				
TITLE	SEC <input type="checkbox"/> Delete				
NAME	FELIX, FRANCISCO				
STREET ADDRESS	2806 FALCON CREST PLACE				
CITY-ST-ZIP	LAKE MARY, FL 32746				
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  FRANCISCO FELIX 4/24/2005 (407) 330-1641					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

14000000



04222005 Chg-P CR2E034 (10/03)