2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146815

Entity Name: PT CONNECTION INC.

FILED Jul 22, 2005 Secretary of State

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

1025 W. OAKRIDGE RD. 1822 GRASMERE DRIVE ORLANDO, FL 32809 APOPKA, FL 32703 US

Current Mailing Address: New Mailing Address:

 1025 W. OAKRIDGE RD.
 1822 GRASMERE DRIVE

 ORLANDO, FL 32809
 APOPKA, FL 32703 US

FEI Number: 06-1737434 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

YAP, HOOVER

1025 W. OAKRIDGE RD.

ORLANDO, FL 32809 US

JAVIER, MYRA SHEILA B RPT
1822 GRASMERE DRIVE
APOPKA, FL 32703 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: MYRA SHEILA JAVIER 07/22/2005

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 DIDECTORS

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 JAVIER, MYRA SHEILA B
 Name:
 JAVIER, MYRA SHEILA B RPT

 Address:
 532 SABAL LAKE DR., APT. 108
 Address:
 1822 GRASMERE DRIVE

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 APOPKA, FL 32703

Title: V () Delete Title: V (X) Change () Addition Name: YAP, HOOVER Name: JAVIER, DENNIS F MR

 Name:
 YAP, HOOVER
 Name:
 JAVIER, DENNIS F MR

 Address:
 3950 KIAWA DR.
 Address:
 1822 GRASMERE DRIVE

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:
 APOPKA, FL 32703

Title: ST (X) Delete Title: () Change () Addition

 Name:
 MERCADO, RÓNEL
 Name:

 Address:
 6669 CHERRY GROVE CIRCLE
 Address:

 City-St-Zip:
 ORLANDO, FL 32809
 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: MYRA SHEILA JAVIER P 07/22/2005