


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P30999</b>	
1. Entity Name TENSAT, INC.	

Principal Place of Business 5201 102ND AVE N PINELLAS PARK, FL 33782 US	Mailing Address 5201 102ND AVE N PINELLAS PARK, FL 33782 US
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**DO NOT WRITE IN THIS SPACE**



04142005 No Chg-P CR2E034 (10/03)

4. FEI Number 04-2903611	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  RUPPEL, DENNIS G 5201 102ND AVE N PINELLAS PARK, FL 33782	<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000313060 04/18/05-80103-021 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RUPPEL, GEORGE 5201 - 102ND AVENUE NORTH PINELLAS PARK, FL 33782
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD RUPPEL, DENNIS G 5201 - 102ND AVENUE NORTH PINELLAS PARK, FL 33782
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SEIDL, FRANK 5201 102ND AVE N PINELLAS PRK, FL 33782
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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: <u>Frank Seidl / Frank Seidl</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <u>4/18/05</u> 727-546-2446 <small>Daytime Phone #</small>