VOLTAVA (V), INC.       04-13-2004 90009 001 ***158:75         Principal Place of Business       Mailing Address         11151 NB 26 000E       0001 \$**158:75         2. Therball Place of Business       1. Mailing Address         3alio, Apt. 4, etc.       Debug Address         2. Therball Place of Business       1. Mailing Address         3alio, Apt. 4, etc.       Debug Address         2. Therball Place of Business       1. Mailing Address         3alio, Apt. 4, etc.       Debug Address         2. Therball Place of Business       1. Mailing Address         3alio, Apt. 4, etc.       Debug Address         2. The place of Business       1. Mailing Address         3alio, Apt. 4, etc.       Debug Address         2. The show transfer Address of Current Plagdenes Agent       1. Name and Address of Current Plagdenes Agent         3. The show transfer Address of Current Plagdenes Agent       1. Name and Address of Dermet Haugh Agent         3. The show transfer Address of Current Plagdenes Agent       1. Name and Address of Dermet Haugh Agent         3. The show transfer Address of Dermet Haugh Agent       1. Name and Address of Dermet Haugh Agent         3. The show transfer Address of Dermet Haugh Agent       1. Name and Address of Dermet Haugh Agent         3. The show transfer Address of Dermet Haugh Agent       1. Name and Address of Dermet Haugh Agent	2004 FOR PROFIT CORPORATION ANNUAL REPORT						FILED Apr 13, 2004 8:00 an Secretary of State				
11151 N.W. 26 DRVE CORAL SPRINCS, FL 33065       1116 N.W. 26 DRVE CORAL SPRINCS, FL 33065       54 03 32 25 0         2. Procipil Place of Business       3. Mailing Address       04022004       Crg.P       CR2004 (10/05)         3. Sile, Apt. 4. etc.       Sile, Apt. 4. etc.       Output of the serverse of the serverse       04022004       Crg.P       CR2004 (10/05)         2. Procipil Place of Business       Sile, Apt. 4. etc.       Sile, Apt. 4. etc.       Output of the serverse of the serverse       Sile, Apt. 4. etc.         2. Procipil Place of Business       Control       20       Country       Sile, Country	DOCUMENT # P9500008928 1. Entity Name VOLTAVA (IV), INC.										
Suite, Apr. 4, etc.       Suite, Apr. 4, etc.       Outputs Apr. 4, etc.       Outputs Apr. 4, etc.         City & State       City & State       City & State       Applied Fix         Zip       Country       Zip       Country       S. CostSoES3       Barton Status Desires         State       Applied Fix       State       State       State       State         Applied Fix       State       State       State       State       State         State       Country       Zip       Country       State	11161 N.W. 3	26 DRIVE	11161 N.W. 26 DRIVE		1	1 - 1997 (61) 116	10101 0111 00111 00111				
City & State     C	Principal Place of Business     S. Mailing Address				<u></u>						
Zip         Country         Zip         Country         Status Desired         Status Desi	Suite, Apt. #, etc.		Suite, Apt. #, etc.			04022004	Chg-P	CR2E034	(10/03)		
Zip       Country       E. Country       E. Country       E. Contriction of Status Desired       \$ \$8,75 haddoom         A. Name and Address of Current Registered Agent       Y. Mans and Address of Current Registered Agent       Y. Mans and Address of New Heightaired Agent         MORES, SYLVIA       Name	City & State		City & State								
B. Name and Address of Rumen Registered Agent     Nore     No	Zip	Country	Zip	Cour	itry				3.75 Add	titional	
MOSES, SYLVÄ  THE NOVES  STRET AGKSS  THE ADDERVE  CORAL SPRINGS, FL 33065	<u> </u>	6. Name and Address of Curr	ent Registered Agent	.1		7. Name and	Address of New			 , , , , ,	
A. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with, and accept the obligations of registered agent. With the State of Poricle. I am familiar with and accept the obligations of registered agent. With the State of Poricle. I am familiar with and accept the obligations of registered agent. I am familiar with and accept the obligations of registered agent. I am familiar with a material agent. I am familiar with and accept the obligations of registered agent. I am familiar with and accept the obligations of registered agent. I am familiar with and accept the obligations of registered agent. I am familiar with and accept the obligations of registered agent. I am familiar with and accept the obligations of registered agent. I am familiar with and accept the obligations of registered agent. I am f	11161 N.W	1. 26 DRIVE	· _		EG	P.O. Box Numbe	r is Not Accepta	DEES Deen Deen de	G. G	· · · · · · · · · · · · · · · · · · ·	
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PLLE NOWTH STEEL State       INTE:       INTE:       INTE:         PLLE NOWTH STEEL State       9: Election Campaign Financing Trust Fund Contrustion.       \$5,00 May Be Added to Frees         10.       OFFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11         III.       OFFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11         III.       OFFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11         III.       MOSES, SYLVA       III.E       III.E       III.E         WWE       MOSES, SARAH       III.E       III.E       III.E       III.E         III.E       STRET ADDRS       III.E       III.E       III.E       III.E         III.E       STRET ADDRS       III.E       III.E       III.E       III.E       III.E         III.E       IIII.E <th>the obligati</th> <th></th> <th>tor the purpose of changing its</th> <th>s register</th> <th></th> <th>red agent, or both</th> <th>n, in the State of</th> <th>Florida. Lam fan</th> <th>niliar with,</th> <th>and accept</th>	the obligati		tor the purpose of changing its	s register		red agent, or both	n, in the State of	Florida. Lam fan	niliar with,	and accept	
After Nay 1, 2004 Fee will be \$550.00       Trust Fund Contribution.       Added to Fees         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         ITTLE       Delete       TTLE       Change       Addition         INDE       Delete       TTLE       Change       Addition         STRET ADDRESS       CORAL SPRINGS, FL 33065       CIT-ST-2P       CORAL SPRINGS, FL 33065       CIT-ST-2P         INTE       MOSES, SARAH       ITLE       NAKE       Change       Addition         STRET ADDRESS       CORAL SPRINGS, FL 33065       CIT-ST-2P       CORAL SPRINGS, FL 33065       CIT-ST-2P         INTE       MOSES, SARAH       ITLE       NAKE       Corange       Addition         STRET ADDRESS       CORAL SPRINGS, FL 33065       CIT-ST-2P       CORAL SPRINGS, FL 33065       CIT-ST-2P         INTE       STRET ADDRESS       CIT-ST-2P       ITLE       Change       Addition         STRET ADDRESS       CIT-ST-2P		Sprattic sport or plated page of reacting a	gent and use if applicable. (NO	TE: Registere	Agent signature required	t when reinstating)		DATE	100	<b>7</b>	
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WKE     MOSES, SYLVIA     Image     Image <th></th> <th></th> <th>· · · · · · · · · · · · · · · · · · ·</th> <th></th> <th></th> <th>ADDITIONS/0</th> <th>CHANGES TO O</th> <th></th> <th></th> <th></th>			· · · · · · · · · · · · · · · · · · ·			ADDITIONS/0	CHANGES TO O				
MOSES, SARAH       Intel Change       Intel Change <td< td=""><td>VAME STREET ADORESS</td><td>MOSES, SYLVIA 11161 N.W. 26TH DR.</td><td></td><td>NAN Stri</td><td>ie Et adoress</td><td></td><td></td><td>L</td><td>_j change</td><td><u>. 1 Nodinon</u></td></td<>	VAME STREET ADORESS	MOSES, SYLVIA 11161 N.W. 26TH DR.		NAN Stri	ie Et adoress			L	_j change	<u>. 1 Nodinon</u>	
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AWAE       NME         STREET ADDRESS       STREET ADDRESS         STY-ST-ZP       STREET ADDRESS         I2. 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.	NAME STREET ADDRESS		Delete	NAN Stri	re Eet adoress			C	] Change	Addition	
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SIGNATURE: Edward H. Moses 04/06/04 (954) 344-0603	of the cor changed,	on this report or supplemental report poration or the receiver or trustee e or on an attachment with an addre	ort is true and accurate and that impowered to execute this repor se with all other like empowered	rny signa it as requi d.	ture shall have the red by Chapter 607	same legal effect 7, Florida Statutes	as if made unde a; and that my na	er oath; that I am ime appears in B	an officer llock 10 of	or director r Block 11 if	

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