

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000056289

Entity Name: ENTERTAINMENT TECHNOLOGIES, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

1811 NE JACKSONVILLE ROAD
OCALA, FL 34470

New Principal Place of Business:

1469 N. MAGNOLIA AVE
SUITE F
OCALA, FL 34475

Current Mailing Address:

1811 NE JACKSONVILLE ROAD
OCALA, FL 34470

New Mailing Address:

1469 N. MAGNOLIA AVE
SUITE F
OCALA, FL 34475

FEI Number: 59-3392166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOSIEUR, MICHAEL H
1811 NE JACKSONVILLE ROAD
OCALA, FL 34470 US

Name and Address of New Registered Agent:

MOSIEUR, MICHAEL H
1469 N. MAGNOLIA AVE
SUITE F
OCALA, FL 34470 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:

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: MOSIEUR, MICHAEL H
Address: 1811 NE JACKSONVILLE ROAD
City-St-Zip: Ocala, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: MORALES, JOHN C
Address: 1469 N. MAGNOLIA AVE, SUITE F
City-St-Zip: Ocala, FL 34475

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: JOHN C. MORALES

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date