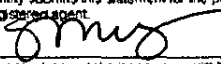


**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000058921 1. Entity Name COSMOS TECHNOLOGY, INC.																																		
Principal Place of Business 715 SUGAR BAY WAY STE 107 LAKE MARY, FL 32746 US		Mailing Address 715 SUGAR BAY STE 107 LAKE MARY, FL 32746 US																																
2. Principal Place of Business 1512 Farrindon Circle		3. Mailing Address 1512 Farrindon Circle																																
Suite, Apt. #, etc. Heathrow,		Suite, Apt. #, etc. 																																
City & State Heathrow, FL.		City & State Heathrow, FL.																																
Zip 32746		Country Seminole																																
4. FEI Number 59-3430418		Applied For <input type="checkbox"/> Not Applicable																																
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																
6. Name and Address of Current Registered Agent MOODY, JERRY R 715 SUGAR BAY WAY #107 LAKE MARY, FL 32746		7. Name and Address of New Registered Agent 1512 Farrindon Circle Heathrow, FL. 32746																																
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:  DATE: 4-21-03																																		
9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fee		10. OFFICERS AND DIRECTORS																																
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE PCEO <input type="checkbox"/> Delete </td> <td style="width: 50%; padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> NAME MOODY, JERRY R PCEO </td> <td style="padding: 2px;"> NAME </td> </tr> <tr> <td style="padding: 2px;"> STREET ADDRESS 715 SUGAR BAY WAY STE 107 </td> <td style="padding: 2px;"> STREET ADDRESS </td> </tr> <tr> <td style="padding: 2px;"> CITY-ST-ZIP LAKE MARY, FL 32746 </td> <td style="padding: 2px;"> CITY-ST-ZIP </td> </tr> <tr> <td style="padding: 2px;"> TITLE 1512 Farrindon Circle <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> NAME </td> <td style="padding: 2px;"> NAME </td> </tr> <tr> <td style="padding: 2px;"> STREET ADDRESS Heathrow, FL. 32746 </td> <td style="padding: 2px;"> STREET ADDRESS </td> </tr> <tr> <td style="padding: 2px;"> CITY-ST-ZIP </td> <td style="padding: 2px;"> CITY-ST-ZIP </td> </tr> <tr> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> NAME </td> <td style="padding: 2px;"> NAME </td> </tr> <tr> <td style="padding: 2px;"> STREET ADDRESS </td> <td style="padding: 2px;"> STREET ADDRESS </td> </tr> <tr> <td style="padding: 2px;"> CITY-ST-ZIP </td> <td style="padding: 2px;"> CITY-ST-ZIP </td> </tr> <tr> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> NAME </td> <td style="padding: 2px;"> NAME </td> </tr> <tr> <td style="padding: 2px;"> STREET ADDRESS </td> <td style="padding: 2px;"> STREET ADDRESS </td> </tr> <tr> <td style="padding: 2px;"> CITY-ST-ZIP </td> <td style="padding: 2px;"> CITY-ST-ZIP </td> </tr> </table>	TITLE PCEO <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME MOODY, JERRY R PCEO	NAME 	STREET ADDRESS 715 SUGAR BAY WAY STE 107	STREET ADDRESS 	CITY-ST-ZIP LAKE MARY, FL 32746	CITY-ST-ZIP 	TITLE 1512 Farrindon Circle <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 	NAME 	STREET ADDRESS Heathrow, FL. 32746	STREET ADDRESS 	CITY-ST-ZIP 	CITY-ST-ZIP 	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 	NAME 	STREET ADDRESS 	STREET ADDRESS 	CITY-ST-ZIP 	CITY-ST-ZIP 	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 	NAME 	STREET ADDRESS 	STREET ADDRESS 	CITY-ST-ZIP 	CITY-ST-ZIP
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(5)(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: 		DATE: 4-21-03																																

11010340



CHECK HERE IF MAKING CHANGES

CORP034 (10/02)