2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000070318

Entity Name: TEOROM, INC.

FILED May 24, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

4350 GULFSHORE BLVD. N #502 B 382 12TH AVE SOUTH NAPLES, FL 34103 NAPLES, FL 34102

Current Mailing Address: New Mailing Address:

4350 GULFSHORE BLVD. N #502 B 382 12TH AVE SOUTH NAPLES, FL 34103 NAPLES, FL 34102

FEI Number: 59-3395472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOUDIER, FABIEN MR
4350 GULFSHORE BLVD. N #502 B
NAPLES, FL 34103

BOUDIER, FABIEN MR
382 12TH AVE SOUTH
NAPLES, FL 34102

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: FABIEN BOUDIER 05/24/2004

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 DIRECTORS:

Title:

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

Name: BOUDIER, FABIEN MR Name: BOUDIER, FABIEN MR
Address: 4350 GULFSHORE BLVD. N #502 B Address: 382 12TH AVE SOUTH

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34102

Title: Title: () Delete (X) Change () Addition Name: BOUDIER, LAURENCE MRS Name: BOUDIER, LAURENCE MRS 4350 GULFSHORE BLVD. N #502 B Address: 382 12TH AVE SOUTH Address: NAPLES, FL 34103 NAPLES, FL 34102 City-St-Zip: 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: FABIEN BOUDIER PRES 05/24/2004