2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000023613

FILED Apr 17, 2006 Secretary of State

Entity Name: NETWORKED KNOWLEDGE SYSTEMS, INC. **Current Principal Place of Business: New Principal Place of Business:** 6015 BENJAMIN RD., STE. 315 TAMPA, FL 33634 **Current Mailing Address: New Mailing Address:** P.O. BOX 20772 TAMPA, FL 336220772 FEI Number: 59-3435765 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: BRAVICK, ERIC 6015 BENJAMIN RD. TAMPA, FL 33634 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: CFO (X) Change () Addition HOLLOWAY, JASON C RIEK, DAVID Name: Name: 6015 BENJAMIN ROAD STE 315 6015 BENJAMIN ROAD STE 315 Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33634

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

 Name:
 BRAVICK, STACEY J
 Name:

 Address:
 6015 BENJAMIN ROAD STE 315
 Address:

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STACEY J. BRAVICK P 04/17/2006