

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000037400

FILED
Apr 19, 2005
Secretary of State

Entity Name: NETWORK ENTERPRISES OF ORLANDO INC.

Current Principal Place of Business:

8935 JONATHAN MANOR DRIVE
ORLANDO, FL 32819

New Principal Place of Business:

10536 WODCHASE CIRCLE
ORLANDO, FL 32836

Current Mailing Address:

8935 JONATHAN MANOR DRIVE
ORLANDO, FL 32819

New Mailing Address:

10536 WOODCHASE CIRCLE
ORLANDO, FL 32836

FEI Number: 59-3445178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOFFANELLO, ANGELO
8935 JONATHAN MANOR DRIVE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

TOFFANELLO, ANGELO
10536 WOODCHASE CIRCLE
ORLANDO, FL 32836 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:

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOFFANELLO, ANGELO
Address: 8935 JONATHAN MANOR DRIVE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TOFFANELLO, ANGELO
Address: 10536 WOODCHASE CIRCLE
City-St-Zip: ORLANDO, FL 32836

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: ANGELO G. TOFFANELLO

P

04/19/2005

Electronic Signature of Signing Officer or Director

Date