

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000059498

Entity Name: VENATECH, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1125 N. ROCK ISLAND ROAD
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

1125 N. ROCK ISLAND ROAD
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-0769144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLACK, MARC R ESQ.
11555 HERON BAY BLVD.
SUITE 200
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

CHIOFALO, RICHARD
1125 N. ROCK ISLAND ROAD
MARGATE, FL 33063 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: RICHARD CHIOFALO

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BLOOM, ELLEN
Address: 1125 N. ROCK ISLAND RD
City-St-Zip: MARGATE, FL 33063

Title: DVP () Delete
Name: BOFSHEVER, GARY
Address: 6852 N.W. 102 LANE
City-St-Zip: PARKLAND, FL 33076

Title: DVP () Delete
Name: POLLACK, MARC R
Address: 11555 HERON BAY BOULEVARD SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DT () Delete
Name: BOFSHEVER, HARLEY
Address: 1305 NW 127TH AVE.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DS () Delete
Name: CHIOFALO, RICHARD
Address: 1125 N ROCK ISLAND RD.
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: POLLACK, MARC R
Address: 135 LAKOTA COVE
City-St-Zip: AUSTIN, TX 78738

Title: DT (X) Change () Addition
Name: BOFSHEVER, HARLEY
Address: 4365 BANYAN TRAILS DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARC R. POLLACK

DVP

04/29/2009

Electronic Signature of Signing Officer or Director

Date