2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000059498

Entity Name: VENATECH, INC.

FILED Apr 22, 2003 Secretary of State

Current Dringing Place of Business				New Principal Place of Pusiness		
Current Principal Place of Business:				New Principal Place of Business:		
1125 N. ROCK ISLAND ROAD MARGATE, FL 33063						
Current Mailing Address:				New Mailing Address:		
1125 N. ROCK ISLAND ROAD MARGATE, FL 33063						
FEI Number: 6	65-0769144	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
POLLACK, MARC R ESQ. 2825 UNIVERSITY DRIVE SUITE 350 CORAL SPRINGS, FL 33065 US				POLLACK, MARC R ESQ. 11555 HERON BAY BLVD. SUITE 200 CORAL SPRINGS, FL 33076 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:				04/22/2003		
Electronic Signature of Registered Agent				Date		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	DP (BLOOM, ELL 1125 N. ROC MARGATE, F	K ISLAND RD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	DVP (BOFSHEVER 6852 N.W. 10 PARKLAND, F	2 LANE		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	POLLACK, M. 8988 NW 52N			Title: Name: Address: City-St-Zip:	DVP POLLACK, M 8988 NW 52 CORAL SPR	
Title: Name: Address: City-St-Zip:	BOFSHEVER 1305 NW 127			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	CHIOFALO, R 1125 N ROCK			Title: Name: Address: City-St-Zip:	DS CHIOFALO, 1125 N ROC MARGATE,	CK ISLAND RD.

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: MARC R. POLLACK DVP 04/22/2003