## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000002026

FILED May 01, 2009 Secretary of State

Entity Nam	e: FPTAT	ECHNOLOGIES, INC.		•	
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
9432 BAYM STE. 140 BAYM JACKSONV	AYWOOD (	CENTER			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
9432 BAYM STE. 140 B JACKSONV	AYWOOD (	ENTER			
FEI Number:	59-3508330	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
TOBIN & REYES PA 5355 TOWN CENTER ROAD SUITE 204 BOCA RATON, FL 33486 US The above named entity submits this statement for the purpose of			7955 LITTLE FOX LAN JACKSONVILLE, FL 3	RENARD, BRUCE W MR. 7955 LITTLE FOX LANE JACKSONVILLE, FL 32256 US of changing its registered office or registered agent, or both,	
in the State	of Florida.				
SIGNATURE: BRUCE W. RENARD				05/01/2009	
Electronic Signature of Registered Agent  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:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	MEZRAH, AL	VELAND ST., STE A	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BIMONTE, JI 1393 SW 12		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	P RENARD, BR	)Delete UCE	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: BRUCE W. RENARD P 05/01/2009

9432 BAYMEADOWS ROAD, STE. 140 BAYWOOD

JACKSONVILLE, FL 32256 US

Address: City-St-Zip: