2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2004
Secretary of State

DOCUMENT# P98000004145

Entity Name: TECHNOLOGIES TO BE, INCORPORATED

Current Principal Place of Business:

12001 SCIENCE DRIVE
165
ORLANDO, FL 32826

New Principal Place of Business:

Current Mailing Address:

12001 SCIENCE DRIVE
165
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 59-3487054 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVIN, MICHAEL A
858 LINTON AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEVIN, MICHAEL A
Address: 858 LINTON AVE
City-St-Zip: ORLANDO, FL

Title: V ( ) Delete
Name: FULLER, GLENN C
Address: 4718 HAYLOCK DRIVE
City-St-Zip: ORLANDO, FL

Title: ST ( ) Delete
Name: FULLER, MICHELLE G
Address: 4718 HAYLOCK DRIVE
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEVIN, MICHAEL A
Address: 858 LINTON AVE
City-St-Zip: ORLANDO, FL 32809

Title: V (X) Change ( ) Addition
Name: FULLER, GLENN C
Address: 4718 HAYLOCK DRIVE
City-St-Zip: ORLANDO, FL 32807

Title: ST (X) Change ( ) Addition
Name: FULLER, MICHELLE G
Address: 4718 HAYLOCK DRIVE
City-St-Zip: ORLANDO, FL 32807

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: MICHAEL A. LEVIN P 02/17/2004

Electronic Signature of Signing Officer or Director — Date