

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045699

FILED
Apr 29, 2005
Secretary of State

Entity Name: INFORMATION ARCHITECHS & CONSULTING, INC.

Current Principal Place of Business:

21250 WOLF BRANCH RD
MT. DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

21250 WOLF BRANCH RD
MT. DORA, FL 32757

New Mailing Address:

FEI Number: 59-3511845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLK, TOM
21250 WOLF BRANCH RD.
MT. DORA, FL 32757 US

Name and Address of New Registered Agent:

POLK, THOMAS
21250 WOLF BRANCH RD.
MT. DORA, FL 32757 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: THOMAS POLK

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: POLK, THOMAS
Address: 21250 WOLF BRANCH ROAD
City-St-Zip: MT. DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS POLK

PTS

04/29/2005

Electronic Signature of Signing Officer or Director

Date