2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000035627

Entity Name: NETPHILES INC

FILED Aug 07, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2512 BALSAM TERRACE SUITE 200 TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

P.O. BOX 4107
TALLAHASSEE, FL 32315
2512 BALSAM TERRACE
SUTE 200
TALLAHASSEE, FL 32303

FEI Number: 59-3571572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAQ, MAHMOOD

1987 HICKORY TREE LANE
TALLAHASSEE, FL 32303 US

HAQ, MAHMOOD
403 NORTH RIDE
TALLAHASSEE, FL 32303

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: MAHMOOD HAQ 08/07/2004

Electronic Signature of Registered Agent Date

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:

US

Title: PD () Delete Title: PD (X) Change () Addition Name: MAHMOOD, HAQ Name: MAHMOOD, HAQ

 Name:
 MAHMOOD, HAQ
 Name:
 MAHMOOD, HAQ

 Address:
 1987 HICKORY TREE LANE
 Address:
 403 NORTH RIDE

 City-St-Zip:
 TALLAHASSEE, FL 32303
 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 MAHBOOB, AZHAR
 Name:
 MAHBOOB, AZHAR

 Address:
 1987 HICKORY TREE LANE
 Address:
 403 NORTH RIDE

 City-St-Zip:
 TALLAHASSEE, FL 32303
 City-St-Zip:
 TALLAHASSEE, FL 32303

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: MAHMOOD HAQ PD 08/07/2004