

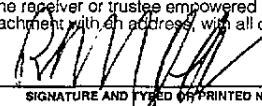


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 23, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000046980</b>			
1. Entity Name DATECH INTERNATIONAL INC.			
Principal Place of Business 3899 N.W. 7TH STREET SUITE #203 MIAMI, FL 33126	Mailing Address 3899 N.W. 7TH STREET SUITE #203 MIAMI, FL 33126		
<b>DO NOT WRITE IN THIS SPACE</b>			
		03192005    No Chg-P    CR2E034 (10/03)	
		4. FEI Number 65-0922229	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  CROES, RICHARD 3899 N.W. 7TH STREET SUITE #203 MIAMI, FL 33126		<b>DO NOT WRITE IN THIS SPACE</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		<div>UN00000274081</div> <div>03/23/05-80054-018 150.00</div> <b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST CROES, RICHARD 3899 N.W. 7TH STREET SUITE #203 MIAMI, FL 33126		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD OLGA, CROES 3899 NORTHWEST 7TH STREET #203 MIAMI, FL 33126		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date _____ Daytime Phone # _____	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			