

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90415 014 ***150.00

DOCUMENT # P99000054209

1. Entity Name

TERMINATION TECHNOLOGIES, INC.



Principal Place of Business

3708 ROYAL PALM DRIVE
 BRADENTON FL 34210

Mailing Address

6023 26TH ST W
 PMB 270
 BRADENTON FL 34207

94063637



MOORE CR2E034 (11/03)

2. Principal Place of Business

5320 53AVE EAST

Suite, Apt. #, etc. # Q-33

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

City & State

BRADENTON FL

City & State

BRADENTON FL

4. FEI Number

65-0926683

Applied For

Not Applicable

Zip

34203

Country

U.S.A.

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POWELL, BRAD W
 3708 ROYAL PALM DRIVE
 BRADENTON FL 34210

7. Name and Address of New Registered Agent

Name

ALAN G. FORBES

Street Address (P.O. Box Number is Not Acceptable)

5320 53AVE EAST

Q-33

City

BRADENTON

FL

Zip Code

34203

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

Alan G. Forbes

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	FORBES, BECKY	5320 53AVE EAST #933	BRADENTON FL 34203	<input type="checkbox"/>
D	FORBES, ALAN G	5320 53AVE EAST #933	BRADENTON FL 34203	<input type="checkbox"/>
D	POWELL, BRAD W	3708 ROYAL PALM DRIVE	BRADENTON FL 34210	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Alan G. Forbes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/04

Date

941-752-7962

Daytime Phone #