

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074225

Entity Name: ORDERTAKING.COM, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

7685 LAKE WORTH RD.
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

7685 LAKE WORTH RD.
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 65-0941921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANK, MITCHELL
641 INLET RD
NORTH PALM BEACH, FL 33408 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: PSD () Delete
Name: FRANK, MITCHELL S
Address: 641 INLET ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VPTD () Delete
Name: FRANK, KIMBERLY
Address: 641 INLET ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP () Delete
Name: MORICI, TODD
Address: 300 CULFAX AVE.
City-St-Zip: CLIFTON, NJ 07013

Title: VP () Delete
Name: MORICI, MARYLYNN
Address: 300 CULFAX AVE.
City-St-Zip: CLIFTON, NJ 07013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MITCHELL FRANK

PSD

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date