

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21673

Entity Name: INFINISYS, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

5 CROSS CREEK
STE 100
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

5 CROSS CREEK
SUITE 100
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 59-3042861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUNTARP, PAUL M JR
185 CYPRESS POINT PKWY, STE 6
SUITE B
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

GUNTARP, PAUL M JR
185 CYPRESS POINT PKWY
SUITE B
PALM COAST, FL 32164 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:

01/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLTZ, RICHARD
Address: 5 CROSS CREEK WAY
City-St-Zip: ORMOND BCH, FL 32174

Title: D () Delete
Name: HOLTZ, ROCHELLE
Address: 5 CROSS CREEK WAY
City-St-Zip: ORMOND BCH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROCHELLE HOLTZ

D

01/05/2005

Electronic Signature of Signing Officer or Director

Date