

11/1/03

**Alternative Reporting And Disclosure Statement
For Nonqualified Deferred Compensation Plans**

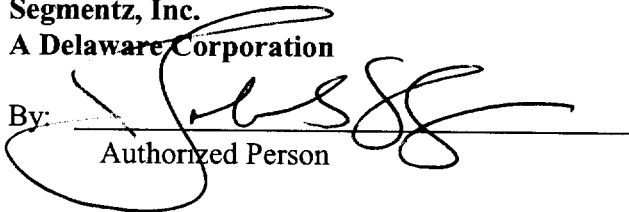
To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N 1513
U.S. Department of Labor
200 Constitution Ave. N.W.
Washington, DC 20210

2520043381413

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: Segmentz, Inc.
2. The mailing address of the Employer is: 18302 Highwoods Preserve Parkway
Suite 100
Tampa, FL 33647
3. The Employer Identification Number is: 03-0450326
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:
One Plan(s) covering 15 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Pension and Welfare Benefit Program upon request.

**Segmentz, Inc.
A Delaware Corporation**

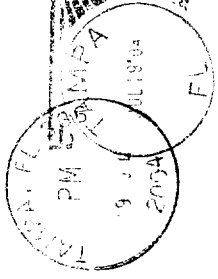
By: 
Authorized Person

Dated: 7/16/04



Mark D. Scheidter, CFP®, LUTCF
Tampa Business Center
4010 Boy Scout Boulevard, Suite 700
Tampa, FL 33607

RETURN SERVICE REQUESTED



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