2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 17, 2006 08:00 AM **Secretary of State DOCUMENT #623033** ACCESS/INTERNATIONAL, INC. Mailing Address Principal Place of Business PO BOX 273528 PO BOX 273528 BOCA RATON, FL 33427-3528 US BOCA RATON, FL 33427-3528 US No Chg-P CR2E034 (11/05) 01122006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1918791 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ADORNO & YOSS- JOHN KOENIG, ESQ. DO NOT WRITE 151 FORUM PLACE BUILDING 200 IN THIS SPACE WEST PALM BEACH, FL 33401 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_ Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. ∵□ Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. מפ FOSS, JOHN P. NAME STREET ADDRESS 1320 S.W. 20TH ST. संक्षेत्रातात्र उद्ययसम्ब CHY-ST-ZIP BOCA RATON, FL 33486 U1/20/U5-80023-023 150.00 VSD TITLE NAME EDSON, ANNA STREET ADDRESS 1320 SW 20TH ST CITY-ST-ZIP BOCA RATON, FL 33486 TITLE MURPHY, EDWARD STREET ADDRESS 91 CHRISTINE DR DO NOT WRITE CITY-ST-ZIP E HANOVER, NJ 07936 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME

12. I hereby certify that the information supplied with this filled does not qualify for the exemptions contained in Chapter 119, 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 entropywhed 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:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

JW John Foss President

/<u>13/06 973-</u>

FILED

Daytime Phone #