


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 476912
 1. Entity Name
APPLIED METALS SCIENCE, INC.



Principal Place of Business Mailing Address
4740 126TH AVE. N. SUITE L/F **4740 126TH AVE. N. SUITE L/F**
CLEARWATER, FL 33762 US **CLEARWATER, FL 33762 US**



01122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1663570 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
TOTH, THEODORE
9945 60TH STREET
PINELLAS PARK, FL 33782

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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) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	INGEBRAND, ILONA
STREET ADDRESS	1993 GEORGIA CR SO.
CITY-ST-ZIP	CLEARWATER, FL
TITLE	VP
NAME	TOTH, KAREN
STREET ADDRESS	9945 60 ST N.
CITY-ST-ZIP	PINELLAS PARK, FL 33782
TITLE	P
NAME	TOTH, THEODORE
STREET ADDRESS	4240 126TH AVE
CITY-ST-ZIP	CLEARWATER, FL 33762
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/29/06-80109-022 150.00

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12. I hereby certify that the information supplied with this filing 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 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: *Theodore Toth* Theodore Toth 4-13-06 727-572-6888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #