

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 585111

FILED
Apr 30, 2007
Secretary of State

Entity Name: COMPUTERIZED RADIATION SCANNERS, INC.

Current Principal Place of Business:

140 SOPWITH DR
VERO BEACH, FL 32968 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 650887
VERO BEACH, FL 32965

New Mailing Address:

FEI Number: 59-1965232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAJOIE, ROGER W.
660 BEACHLAND BLVD. #201
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

LAJOIE, ROGER W.
3545 OCEAN DRIVE
SUITE 201
VERO BEACH, FL 32963 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: ROGER W. LAJOIE

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDERSSON, NILS BO
Address: 140 SOPWITH DR
City-St-Zip: VERO BCH, FL 32968 US

Title: STD () Delete
Name: ANDERSSON, ULLA BIRGITTA
Address: 140 SOPWITH DR
City-St-Zip: VERO BCH, FL 32968 US

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 exemption stated 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 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: ULLA ANDERSSON

STD

04/30/2007

Electronic Signature of Signing Officer or Director

Date