## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 09, 2006 08:00 AM Secretary of State

DOCUMENT # 606071  1. Entity Name MICRO SYSTEMS ENGINEERING, INC.					Secretary of State
Principal Place of 2912 61ST AVI SAINT PETERSE	ES 2	eiling Address 912 6 IST AVE S AINT PETERSBURG, FL 33711	2 -	2 155127 1111	
DO	N THIS SPA	CE	01062006 4. FEI Numb 59-187	3284 Not Applicable on Status Desired Status Desired Status Desired Not Applicable	
<del> </del>	6. Name and Address of Current Regis	tered Ament	<u> </u>	<del></del>	Fee Required
CESAR, E ALVAREZ JR 2912 61ST AVE S ST PETE, FL 33712			DO NOT WRITE IN THIS SPACE		
<u></u>	<u></u>			<del></del>	
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 again and title it applicable. (NOTE: Registered Agent signature required when revisiting)  DATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ded to Fees	Unnoco379442 01/10/06-80021-018 150.00
10.	OFFICERS AND DIREC	TORS			
NAME A STREET ADDRESS 2	PDT NLVAREZ, CESAR E., JR. 1912 61AVE S ST PETE, FL 00000, FL 33712	د مند			
NAME STREET ADDRESS CITY-ST-ZIP		***			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		DO	NOT WRITE
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NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					
CITY-S1-ZIP	<u> </u>		L	<del></del>	
12. Thereby 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 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 chapted from an attachment with an address, with all other like empowered.					

SIGNING DEFICER OR DIRECTOR F. ALLIANEZ, VA. 1/6/2006 (727)887-8676