2006 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Jan 12, 2006 08:00 AN Secretary of State		
					Secretary	of State
Principal Place 2326 SOUTH 2F	e of Business CONGRESS AVENUE	Mailing Address 2326 SOUTH CONGRESS AVENUE 2F				
	BEACH, FL 33406-7614 US	WEST PALM BEACH, FL 33406-7	614 US			
D	O NOT WRITE	IN THIS SPAC	E	01052006 No Chg 4. FEI Number 59-2032103 5. Certificate of Status Des	-P CR2E034 (	
	6. Name and Address of Current R	gistered Agent	· ·	·		
STE 300	IN G L PALM WAY NCH, FL 33480			DO NOT IN THIS		
	named entity submits this statement for ti ons of registered agent.	ne purpose of changing its registered	office or registered	agent, or both, in the State	e of Florida. I am famili	ar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and	tille if applicable (NOTE Registered A	gent signature required wh	en reinstading)	DATE	
After Ma	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		ng <b>\$5.0</b> Added	0 May Be to Fees	1999 1996 - A. F. A. S. M. M. Market States of the International Science of the S	
<b>10.</b> TITLE	OFFICERS AND DI PD	RECIONS				
NAME Street address City - St - Zip	MASOTTI, RINO 1780 N TALBOT RD WINDSOR ONT, CAN 00000,			ili) 01/12	10000382858 2/06-80030-0(	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS MCMAHON, FRANCIS J. 2326 S CONGRESS AVE 2F W. PALM BCH., FL			₩24.8 € Lua		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			•••••	DO NOT	WRITE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				IN THIS	SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						:
12. I hereby c indicated of the corp changed,	ertify that the information supplied with the on this report or supplemental report is tr poration or the receiver or trustee empow or on an attachment with an address, wit	is filing does not qualify for the exemu- ue and accurate and that my signature ered to execute this report as required h all other like empowered.	ptions contained in a shall have the sar I by Chapter 607, F	Chapter 119, Florida Stat ne legal effect as if made florida Statutes; and that m	tutes. I further certify th under oath; that I am a: ny name appears in Bio	hat the information n officer or director ck 10 or Block 11 if
SIGNAT		TTED NAME OF SIGNING OFFICER OR DIRECTOR		1-9-04 Date 4	2 Daytime	Phone #