

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90271 044 ***150.00

DOCUMENT # F01000005221

1. Entity Name
INFINITE SPACE SYSTEMS, INC.



Principal Place of Business
**752 WATERWAY DRIVE
NORTH PALM BEACH, FL 33408**

Mailing Address
**752 WATERWAY DRIVE
NORTH PALM BEACH, FL 33408**

14010357



2. Principal Place of Business

500 COMMERCE WAY WEST

3. Mailing Address

500 COMMERCE WAY WEST

Suite, Apt. #, etc.

SUITE #2

Suite, Apt. #, etc.

SUITE #2

City & State

JUPITER FLORIDA

City & State

JUPITER FLORIDA

Zip

33458

Country

USA

Zip

33458

Country

USA

04062005

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3175775

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**COREN, RICHARD S
1601 FORUM PLACE
WEST PALM BEACH, FL 33401**

7. Name and Address of New Registered Agent

Name
ALEX ATHINEOS
Street Address (P.O. Box Number is Not Acceptable)
500 COMMERCE WAY WEST
UNIT #2
City **JUPITER** FL Zip Code **33458**

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

4/19/05

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete
NAME **ATHINEOS, ALEX**
STREET ADDRESS **752 WATERWAY DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH, FL 33408**

TITLE **ST** ☐ Delete
NAME **ATHINEOS, ANNA K**
STREET ADDRESS **752 WATERWAY DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH, FL 33408**

TITLE **CD** ☐ Delete
NAME **KULUKUNDIS, M. MICHAEL**
STREET ADDRESS **752 WATERWAY DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH, FL 33408**

TITLE **D** ☐ Delete
NAME **MCMAMARA, JAMES J**
STREET ADDRESS **752 WATERWAY DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH, FL 33408**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/05