

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000005233 1. Entity Name MARCH PLASMA SYSTEMS, INC.	
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Principal Place of Business 2470-A BATES AVE CONCORD, CA 94520	Mailing Address 2762 LOKER AVE W ARLSBAD, CA 92010
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04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 68-0018641	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILDER, GERALD E 1000 1127GH CIRCLE N STE 1200 SAINT PETERSBURG, FL 33716

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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 NAME STREET ADDRESS CITY-ST-ZIP	D DUNN, ROBERT A 28601 CLEMENS ROAD WESTLAKE, OH 44145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMPBELL, EDWARD P 28601 CLEMENS ROAD WESTLAKE, OH 44145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VEILLETTE, ROBERT E 28601 CLEMENS ROAD WESTLAKE, OH 44145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CUSHING, RAYMOND L 28601 CLEMENS ROAD WESTLAKE, OH 44145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BIERHUIS, PETER 2470-A BATES AVE CONCORD, CA 94520
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000543649
05/11/06-80002-006 150.00

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IN THIS SPACE**

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: PETER BIERHUIS APRIL 27, 2006 925-246-1678
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #