2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006358

Entity Name: COHERENT SYSTEMS INTERNATIONAL, CORP.

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
21945 THREE NOTCH ROAD, SUITE 100 LEXINGTON PARK, MD 20653						
Current Mailing Address:				New Mailing Address:		
21945 THREE NOTCH ROAD, SUITE 100 LEXINGTON PARK, MD 20653			275 S. MAIN STREET DOYLESTOWN, PA 18901			
FEI Number: 52-2295005 FEI Number Applied For () FEI Number			nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SVECZ, MIKE 2909 BAY TO BAY BLVD., SUITE 408 TAMPA, FL 33629 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:						
Electronic Signature of Registered Agent						Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	GREENBERG, R	OTCH ROAD, SUITE 100		Title: Name: Address: City-St-Zip:	CEO (X) CH IANIERI, RICHARD 275 S. MAIN STRE DOYLESTOWN, P.	EET
Title: Name: Address: City-St-Zip:	IANIERI, RICHAF	OTCH ROAD, SUITE 100		Title: Name: Address: City-St-Zip:	COO (X) CH IFFLAND, JOHN 275 S. MAIN STRE DOYLESTOWN, P.	
Title: Name: Address: City-St-Zip:	SVECZ, MIKE	Delete OTCH ROAD, SUITE 100 RK, MD 20653		Title: Name: Address: City-St-Zip:	SVECZ, MIKE	nange()Addition TCH ROAD, SUITE 100 K, MD 20653
Title: Name: Address: City-St-Zip:	TD () I WALTER, BRUC 21945 THREE N LEXINGTON PAR	E A OTCH ROAD, SUITE 100		Title: Name: Address: City-St-Zip:	VPF (X) CH GILSON, HOWARI 275 S. MAIN STRE DOYLESTOWN, P.	EET
Title: Name: Address: City-St-Zip:	LYTLE, JEFFRE	OTCH ROAD, SUITE 100		Title: Name: Address: City-St-Zip:	CONT (X) CH MCQUISTON, ELIZ 275 S. MAIN STRE DOYLESTOWN, P.	EET
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	NONE () CH NONE, NONE 275 S. MAIN STRE DOYLESTOWN, P.	

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: ELIZABETH D. MCQUISTON CONT 07/05/2007