


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 17, 2006 8:00 am
Secretary of State

05-17-2006 90017 003 ***150.00

DOCUMENT # F04000002064 1. Entity Name UNITED AMERICAN TECHNOLOGY, INC.	
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Principal Place of Business 900 N.E. 63RD STREET, SUITE 100 OKLAHOMA CITY, OK 73105 <i>1362 E 15th St Edmond, OK 73013</i>	Mailing Address 900 N.E. 63RD STREET, SUITE 100 OKLAHOMA CITY, OK 73105 <i>Same</i>
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40092948



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 77-0611780	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331
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**DO NOT WRITE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC BACHMAN, JOHN 900 N.E. 63RD STREET, SUITE 100 OKLAHOMA CITY, OK 73105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO ANDERSON, TOM 900 N.E. 63RD STREET, SUITE 100 OKLAHOMA CITY, OK 73105
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	1-23-06 <small>Date</small>	405-715-2077 <small>Daytime Phone #</small>
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