2005 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F04000002456

1. Entity Name BRIJÓT IMAGING SYSTEMS, INC.



Principal Place of Business

Mailing Address

FILED

Apr 29, 2005 8:00 am Secretary of State

04-29-2005 90261 038 ***158.75



200 SOUTH BISCAYNE BLVD., STE. 4000 MIAMI, FL 33131			200 SOUTH B	C/O STEEL HECTOR & DAVIS LLP 200 South Biscayne BLVD., Ste. 4000 Miami, Fl 33131			4 1884158 1114	guuyab.		 	 	
5422 CARRIER DRIVE				Mailing Address 5422 CARRIER DRIVE								
Suite, Apt. #, etc. SuitE 107				Suite, Apt. #, etc. SuiTE 107			01062005	Chg-P	CR2E	034 (10/03)		
City & State	e	FL	City & State	NDO	, FL		4. FEI Numbe 20-1003				oplied For ot Applicable	
328	19	Country USA	32819		Country		5. Certificate	of Status Desired	Ø	\$8.75 Add		
6. Name and Address of Current Registered Agent							7. Name and	Address of New	Registered	Agent		
PENINSULA REGISTERED AGENTS, INC. 200 S. BISCAYNE BLVD., 43RD FLOOR MIAMI, FL 33131					Street A	Name Street Address (P.O. Box Number is Not Acceptable)						
					City		<u></u>		Fl	Zip Coo	e	
the obligati		ty submits this statement for stered agent.	the purpose of cha	anging its re	<u>l</u> egistered office or	registen	ed agent, or bot	h, in the State of I			and accept	
SIGNATURE_	Signature, typed	or printed name of registered agent an	nd title if applicable.	(NOTE:	Registered Agent signatu	re required	when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Fir						\$5. Adde	00 May Be ed to Fees					
			L									
10.		OFFICERS AND D	DIRECTORS		11.		ADDITIONS/	CHANGES TO OF	FICERS AN			
TITLE	DPCE			elete	TITLE		ADDITIONS/	CHANGES TO OF	FICERS AN	DIRECTOR Change	S IN 11	
	ANDREW	V, BRIAN SCAYNE BLVD., STE. 40	DIRECTORS D	eleta			ADDITIONS/	CHANGES TO OF	FICERS AN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ANDREW 200 S. BI MIAMI, FI D	V, BRIAN SCAYNE BLVD., STE. 40 L 33131	DIRECTORS D		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		ADDITIONS/	CHANGES TO OF	FICERS AN			
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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:

CEO