2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004094

Entity Name: SPACE ROBOTICS COMPANY, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal	Place of Business:
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10860 EAST OAKWOOD DRIVE 10860 EAST OAKWOOD DRIVE

TUSCO, AZ 85749 TUCSON, AZ 85749

Current Mailing Address: New Mailing Address:

10860 EAST OAKWOOD DRIVE 10860 EAST OAKWOOD DRIVE

TUSCO, AZ 85749 TUCSON, AZ 85749

FEI Number: 72-1554376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PELLETIER, JOAN 5408 PARKWAY DRIVE BELLE ISLE, FL 32809 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PSCD** () Delete Title: **PSCD** (X) Change () Addition

CLOSE, KAREN Name: Name: CLOSE, KAREN

10860 EAST OAKWOOD DRIVE 10860 EAST OAKWOOD DRIVE Address: Address:

City-St-Zip: TUSCON, AZ 85749 City-St-Zip: TUCSON, AZ 85749

Title: Title: (X) Change () Addition () Delete Name: QU. ZHIHAU DR Name: QU. ZHIHAU DR

10860 EAST OAKWOOD DRIVE 10860 EAST OAKWOOD DRIVE Address: Address:

TUSCON, AZ 85749 TUCSON, AZ 85749 City-St-Zip: City-St-Zip:

Title: () Delete Title: D (X) Change () Addition PATEL, DR Name: PATEL, DR Name:

10860 EAST OAKWOOD DRIVE 10860 EAST OAKWOOD DRIVE Address: Address:

City-St-Zip: TUSCON, AZ 85749 City-St-Zip: TUCSON, AZ 85749

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN CLOSE **PSCD** 04/17/2006