

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006357

FILED
Jan 17, 2007
Secretary of State

Entity Name: MIROSAN, INC.

Current Principal Place of Business:

2550 NE 200TH AVENUE
WILLISTON, FL 32696

New Principal Place of Business:

Current Mailing Address:

8400 N. SAM HOUSTON PARKWAY W, SUITE 200
HOUSTON, TX 77064

New Mailing Address:

FEI Number: 20-2586652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Title: CPT () Delete
Name: DESHAZER, MICHAEL S
Address: 8400 N. SAM HOUSTON PARKWAY W, SUITE 200
City-St-Zip: HOUSTON, TX 77064

Title: DVP () Delete
Name: DESHAZER, ROBERT A
Address: 8400 N. SAM HOUSTON PARKWAY W, SUITE 200
City-St-Zip: HOUSTON, TX 77064

Title: DS () Delete
Name: BRYAN, SUSAN D
Address: 8400 N. SAM HOUSTON PARKWAY W, SUITE 200
City-St-Zip: HOUSTON, TX 77064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL DESHAZER

CPT

01/17/2007

Electronic Signature of Signing Officer or Director

_____ Date