## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2006 08:00 AM Secretary of State

DOCUMENT # H75460  1. Entity Name SYSTEMS GO, INC.			
PO BOX 145415 PO	ing Address BOX 145415 RAL GABLES, FL 33114	US	E STANTON DISKI TRUDUK BISKI) BISKI BI
DO NOT WRITE IN		CE	### ### ### ### ### ### ### ### ### ##
KERGE, MARK 521 MAJORCA AVE CORAL GABLES, FL 33134  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  Signature, typed or printed name of registered agent and time if applicable.  (NOTE: Registered Agent agents required when remistancy)  DATE  1111 1111 1534894			
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  4. Election Campaign Financing Trust Fund Contribution.  5.00 May Be Added to Fees			
TO. OFFICERS AND DIRECT  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  CORAL GABLES, FL 33134  TITLE  MAME  STREET ADDRESS  DIVY-SY-ZIP  IITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  MAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  MAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  MAME	OHS		DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP TITLE HAME STRIELT AUDRESS CITY-ST-ZIP TITLE NAME STRIELT ADDRESS CITY-ST-ZIP TITLE NAME STRIELT ADDRESS CITY-ST-ZIP			
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 cath; 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:  SIGNATURE:  SIGNATURE AND TYPED OF PRINTER SAME OF SIGNING OFFICER OR DIRECTOR  Degree Prove 1			