

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J22534

FILED  
Jan 03, 2006  
Secretary of State

Entity Name: PERMVIRO SYSTEMS, INC.

## Current Principal Place of Business:

% CAPITAL CONNECTION, INC.  
3520 TROTTER DR  
ALPHARETTA, GA 30004 US

## New Principal Place of Business:

## Current Mailing Address:

% CAPITAL CONNECTION, INC.  
3520 TROTTER DR  
ALPHARETTA, GA 30004 US

## New Mailing Address:

FEI Number: 59-2706940      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.  
417 E. VIRGINIA STREET  
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: P ( ) Delete  
Name: STOKES, JEFFREY R.,  
Address: 1360 HILLCREST HEIGHTS  
City-St-Zip: ALPHARETTA, GA 30005

Title: V ( ) Delete  
Name: STOKES, ALAN D.,  
Address: 1130 LONGCREEK POINTE  
City-St-Zip: ALPHARETTA, GA 30005

Title: T ( ) Delete  
Name: STOKES, STEPHEN W.,  
Address: 1120 LONGCREEK POINTE  
City-St-Zip: ALPHARETTA, GA 30005

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STOKES, JEFFREY R  
Address: 1360 HILLCREST HEIGHTS  
City-St-Zip: ALPHARETTA, GA 30005

Title: V (X) Change ( ) Addition  
Name: STOKES, ALAN D  
Address: 1130 LONGCREEK POINTE  
City-St-Zip: ALPHARETTA, GA 30005

Title: T (X) Change ( ) Addition  
Name: STOKES, STEPHEN W  
Address: 1120 LONGCREEK POINTE  
City-St-Zip: ALPHARETTA, GA 30005

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: STEPHEN W. STOKES

VP/T

01/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date