

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023001

FILED
Apr 30, 2006
Secretary of State

Entity Name: INTERNAL ACTIVE SYSTEMS, INC.

Current Principal Place of Business:

16702 FAIRBOLT WAY
ODESSA, FL 33556

New Principal Place of Business:

16235 SWAN VIEW CIRCLE
ODESSA, FL 33556

Current Mailing Address:

PO BOX 272996
TAMPA, FL 33688

New Mailing Address:

FEI Number: 59-3638123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, R. CARLTON
1253 PARK STREET
CLEARWATER, FL 33756 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: CEPEDA, RICARDO ANTONIO
Address: 16702 FAIRBOLT WAY
City-St-Zip: ODESSA, FL 33556

Title: VP (X) Delete
Name: CEPEDA, CHERYL
Address: 16702 FAIRBOLT WAY
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CEPEDA, RICARDO ANTONIO
Address: 16235 SWAN VIEW CIRCLE
City-St-Zip: ODESSA, FL 33556

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: RICARDO ANTONIO CEPEDA

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date