

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000049670

FILED
Jan 17, 2006
Secretary of State

Entity Name: CERVELLE SOFTWARE INCORPORATED

Current Principal Place of Business:

P.O. BOX 1597
GOLDENROD, FL 327331597

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1597
GOLDENROD, FL 327331597

New Mailing Address:

FEI Number: 59-3655800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAY, NATHALIE
4216 LANDMARK DRIVE
ORLANDO, FL 32817 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: PRES () Delete
Name: DAY, NATHALIE A PRES
Address: PO BOX 1597
City-St-Zip: GOLDENROD, FL 32733 US

Title: VP () Delete
Name: NIKOLOFF, ALEXANDER P VP
Address: PO BOX 1597
City-St-Zip: GOLDENROD, FL 32733 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NATHALIE DAY

PRES

01/17/2006

Electronic Signature of Signing Officer or Director

Date