

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102486

FILED  
Jul 15, 2005  
Secretary of State

Entity Name: VIRTUAL COMPONENT ENGINEERING SERVICES, INC.

## Current Principal Place of Business:

2607 BOB WHITE CIRCLE  
NAVARRE, FL 32566

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 946  
SHALIMAR, FL 325790946

## New Mailing Address:

2607 BOB WHITE CIRCLE  
NAVARRE, FL 32566

FEI Number: 59-3682849

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HELMICH, KEVIN M ESQ.  
4481 LEGENDARY DRIVE  
SUITE 200  
DESTIN, FL 32541 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GIBBS, JERRY W  
Address: 2607 BOB WHITE CIRCLE  
City-St-Zip: NAVARRE, FL 32566

Title: D ( ) Delete  
Name: GIBBS, BARBARA Y  
Address: 2607 BOB WHITE CIRCLE  
City-St-Zip: NAVARRE, FL 32566

Title: D (X) Delete  
Name: GRIFFITH, GARY G  
Address: 555 CARLA COURT  
City-St-Zip: MOUNTAINVIEW, CA 94040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change ( ) Addition  
Name: GIBBS, JERRY W  
Address: 2607 BOB WHITE CIRCLE  
City-St-Zip: NAVARRE, FL 32566

Title: DP (X) Change ( ) Addition  
Name: GIBBS, BARBARA Y  
Address: 2607 BOB WHITE CIRCLE  
City-St-Zip: NAVARRE, FL 32566

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 Section 119.07(3)(i), 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: BARBARA Y. GIBBS

D

07/15/2005

Electronic Signature of Signing Officer or Director

Date