2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103643

Entity Name: SHARKSEYE SYSTEMS INC

FILED Mar 14, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5060 KEY LARGO DRIVE
PUNTA GORDA, FL 33950 US
26158 STILLWATER CIRCLE
PUNTA GORDA, FL 33955 US

Current Mailing Address: New Mailing Address:

5060 KEY LARGO DRIVE 26158 STILLWATER CIRCLE PUNTA GORDA, FL 33950 US PUNTA GORDA, FL 33955 US

FEI Number: 65-1054781 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GALBURT, PAUL J
5060 KEY LARGO DRIVE
PUNTA GORDA, FL 33950 US
GALBURT, PAUL J
26158 STILLWATER CIRCLE
PUNTA GORDA, FL 33955 US

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: PAUL J GALBURT 03/14/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PRES
 () Delete
 Title:
 PRES
 (X) Change () Addition

 Name:
 SPEE, ROBERT A
 Name:
 GALBURT, PAUL J

 Address:
 1812 HARBOUR CIRCLE
 Address:
 26158 STILLWATER CIRCLE

City-St-Zip: CAPE CORAL, FL 33914 US City-St-Zip: PUNTA GORDA, FL 33955 US

Title: VP () Delete Title: VP (X) Change () Addition Name: GALBURT. PAUL J Name: GALBURT. PAULA J

Address: 5060 KEY LARGO DRIVE Address: 26158 STILLWATER CIRCLE
City-St-Zip: PUNTA GORDA, FL 33950 US City-St-Zip: PUNTA GORDA, FL 33955 US

Title: TRES (X) Delete Title: () Change () Addition

 Name:
 GALBURT, PÀULA JEAN
 Name:

 Address:
 5060 KEY LARGO DRIVE
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33950 US
 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: PAUL J GALBURT PRES 03/14/2006