


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR) -

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90079 023 \*\*\*150.00

<b>DOCUMENT # P01000007261</b> 1. Entity Name <b>MATTSON HOLDINGS CORP.</b>					
Principal Place of Business <b>222 SW 5TH ST. POMPANO BEACH FL</b>			Mailing Address <b>222 SW 5TH ST. POMPANO BEACH FL</b>		
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country			
4. FEI Number <b>65-1080860</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired: <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>KOVIC, LEONARD 7560 NW 29TH ST. MARGATE FL 33063</b>			7. Name and Address of New Registered Agent Name <b>Leonard Kovic</b> Street Address (P.O. Box Number is Not Acceptable) <b>491 NEPTUNE RD.</b> City <b>Juno Bch</b> FL      Zip Code <b>33408</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00.</b> <b>After May 1, 2006 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing <b>\$5.00 May Be</b> Trust Fund Contribution. <input type="checkbox"/> <b>Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOVIC, LEONARD 491 NEPTUNE ROAD JUNO BEACH FL 33408 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOVIC, SANDRA E 491 NEPTUNE ROAD JUNO BEACH FL 33408 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Andrea E. Kovic</i> <i>Sandra E. Kovic</i> <i>2/2/06</i> <i>954-545-8047</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #</small>					