

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071303

Entity Name: INTOXALOCK SYSTEMS INC.

FILED
May 01, 2005
Secretary of State

Current Principal Place of Business:

2810 NORTH "H" ST
PENSACOLA, FL 32501

New Principal Place of Business:

1030 FLEMING DRIVE
PENSACOLA, FL 32514

Current Mailing Address:

P.O. BOX 19005
PENSACOLA, FL 32503

New Mailing Address:

1030 FLEMING DRIVE
PENSACOLA, FL 32514

FEI Number: 59-3597228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDDINS, TRAVIS D
532 MILESTONE BLVD
CANTONMENT, FL 32533 US

Name and Address of New Registered Agent:

EDDINS, TRAVIS D
1030 FLEMING DRIVE
PENSACOLA, FL 32514 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:

05/01/2005

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: V () Delete
Name: EDDINS, ANGELIA R
Address: 3210 N PALAFOX ST.
City-St-Zip: PENSACOLA, FL 32501

Title: V () Delete
Name: EDDINS, ALICE F
Address: 3210 N PALAFOX ST.
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: EDDINS, ANGELIA R
Address: 1030 FLEMING DRIVE
City-St-Zip: PENSACOLA, FL 32514

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: TRAVIS D. EDDINS

RA

05/01/2005

Electronic Signature of Signing Officer or Director

Date