

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104618

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** SALESOUT, INC.

**Current Principal Place of Business:**

3907 N FEDERAL HIGHWAY  
107  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

3907 N FEDERAL HIGHWAY  
107  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

21364 ST. ANDREWS BLVD,  
#221  
POMPANO BEACH, FL 33433

**New Mailing Address:**

21364 ST. ANDREWS BLVD  
#221  
BOCA RATON, FL 33433

**FEI Number:** 65-1153834      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CHARFEN, ALEX CEO  
3907 N FEDERAL HIGHWAY  
107  
POMPANO BEACH, FL 33064 US

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

CHARFEN, ALEX CEO  
21364 ST. ANDREWS BLVD  
#221  
BOCA RATON, FL 33433 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: ALEX CHARFEN      04/26/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: CHARFEN, ALEX CEO  
Address: 3907 N FEDERAL HIGHWAY, #107  
City-St-Zip: POMPANO BEACH, FL 33064

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: CHARFEN, ALEX CEO  
Address: 21364 ST. ANDREWS BLVD, #221  
City-St-Zip: POMPANO BEACH, FL 33433

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: ALEX CHARFEN      PRES      04/26/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date