

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028561

FILED
Apr 25, 2007
Secretary of State

Entity Name: ANYTHING SCREENED, INC.

Current Principal Place of Business:

725 CAMPBELL ST SE
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

725 CAMPBELL ST SE
PALM BAY, FL 32909

New Mailing Address:

FEI Number: 80-0022332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, SANDRA L
725 CAMPBELL ST SE
PALM BAY, FL 32909 US

Name and Address of New Registered Agent:

SMITH, MICHAEL L
725 CAMPBELL ST SE
PALM BAY, FL 32909 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: MICHAEL L SMITH

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, SANDRA L
Address: 725 CAMPBELL ST SE
City-St-Zip: PALM BAY, FL 32909

Title: V () Delete
Name: SMITH, MICHAEL L
Address: 725 CAMPBELL ST SE
City-St-Zip: PALM BAY, FL 32909

Title: C () Delete
Name: SMITH, MICHAEL W
Address: 725 CAMPBELL ST SE
City-St-Zip: PALM BAY, FL 32909

Title: C (X) Delete
Name: SANTIAGO, ABRAHAM
Address: 557 SARAGASSA ST
City-St-Zip: PALM BAY, FL 32908

Title: C (X) Delete
Name: BROUARD, PAUL M
Address: 725 CAMPBELL ST SE
City-St-Zip: PALM BAY, FL 32909

Title: C (X) Delete
Name: JUSTICE, KEVIN P
Address: 1311 WHITEHURST RD
City-St-Zip: PALM BAY, FL 32908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, MICHAEL L
Address: 725 CAMPBELL ST SE
City-St-Zip: PALM BAY, FL 32909

Title: V (X) Change () Addition
Name: SMITH, MICHAEL W
Address: 725 CAMPBELL ST SE
City-St-Zip: PALM BAY, FL 32909

Title: C (X) Change () Addition
Name: SANTIAGO, ABRAHAM
Address: 557 SARAGASSA ST
City-St-Zip: PALM BAY, FL 32908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL L SMITH

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date