

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136557

FILED
Jan 05, 2006
Secretary of State

Entity Name: ACCUBEAM LASER MARKING INC.

Current Principal Place of Business:

1734 APEX RD
SARASOTA, FL 34240

New Principal Place of Business:

1735 APEX RD
SARASOTA, FL 34240

Current Mailing Address:

1734 APEX RD
SARASOTA, FL 34240

New Mailing Address:

1735 APEX RD
SARASOTA, FL 34240

FEI Number: 20-0614101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHANNING, THOMAS P
1734 APEX RD
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

JOHANNING, THOMAS P
1735 APEX RD
SARASOTA, FL 34240 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:

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHANNING, THOMAS P
Address: 1734 APEX RD
City-St-Zip: SARASOTA, FL 34240

Title: V () Delete
Name: JOHANNING, THOMAS M
Address: 1734 APEX RD
City-St-Zip: SARASOTA, FL 34240

Title: S () Delete
Name: DAVENPORT, JACKIE
Address: 1734 APEX RD
City-St-Zip: SARASOTA, FL 34240

Title: T () Delete
Name: JOHANNING, BARBARA
Address: 1734 APEX RD
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHANNING, THOMAS P
Address: 6407 JACKIE LYNN CT.
City-St-Zip: SARASOTA, FL 34241

Title: V (X) Change () Addition
Name: JOHANNING, THOMAS P
Address: 6407 JACKIE LYNN CT.
City-St-Zip: SARASOTA, FL 34241

Title: S (X) Change () Addition
Name: DAVENPORT, JACKIE
Address: 1220 FRASER PINE BLVD.
City-St-Zip: SARASOTA, FL 34240

Title: T (X) Change () Addition
Name: JOHANNING, THOMAS M
Address: 2438 ICECAPADE DR
City-St-Zip: SARASOTA, FL 34240

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: THOMAS P. JOHANNING

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date