

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018356

**FILED**  
**Mar 07, 2006**  
**Secretary of State**

**Entity Name:** METAVANTAGE SCIENCES INC.

**Current Principal Place of Business:**

5093 SW 153 TER  
DAVIE, FL 33331

**New Principal Place of Business:**

110 BONAVENTURE BLVD  
306  
WESTON, FL 33326

**Current Mailing Address:**

5093 SW 153 TER  
DAVIE, FL 33331

**New Mailing Address:**

110 BONAVENTURE BLVD  
306  
WESTON, FL 33326

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

KALMAN, DOUGLAS  
5093 SW 153 TER  
DAVIE, FL 33331    US

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

KALMAN, DOUGLAS  
110 BONAVENTURE BLVD  
306  
WESTON, FL 33326 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/07/2006

\_\_\_\_\_  
Date

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

**OFFICERS AND DIRECTORS:**

Title:            5093            ( ) Delete  
Name:           KALMAN, DOUGLAS S CEO  
Address:        5093 SW 153RD TERRACE  
City-St-Zip:    DAVIE, FL 33331

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

Title:            5093            (X) Change ( ) Addition  
Name:           KALMAN, DOUGLAS S CEO  
Address:        110 BONAVENTURE BLVD #306  
City-St-Zip:    WESTON, FL 33326

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: DOUGLAS KALMAN

CEO

03/07/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date