

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046903

Entity Name: ACTARSIS CORP

FILED  
Sep 08, 2006  
Secretary of State

## Current Principal Place of Business:

4670 NW 122 DRIVE  
CORAL SPRINGS, FL 33076

## New Principal Place of Business:

## Current Mailing Address:

4670 NW 122 DRIVE  
CORAL SPRINGS, FL 33076

## New Mailing Address:

FEI Number: 20-0865996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAROTHERS, SCOTT  
6493 NORTHWEST 78TH PLACE  
PARKLAND, FL 33067 US

## Name and Address of New Registered Agent:

CAROTHERS, SCOTT  
3300 N UNIVERSITY DRIVE  
#401  
CORAL SPRINGS, FL 33067 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: SCOTT CAROTHERS

09/08/2006

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: PD ( ) Delete  
Name: MUSGROVE, ALEJANDRO  
Address: 4670 NW 122 DR  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP/D ( ) Delete  
Name: MUSGROVE, NORA  
Address: 4670 NW 122 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ALEJANDRO MUSGROVE

P

09/08/2006

Electronic Signature of Signing Officer or Director

Date