

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070191

FILED
Apr 10, 2006
Secretary of State

Entity Name: MAD SCIENCE OF TAMPA BAY, INC.

Current Principal Place of Business:

4418 GENTRICE DRIVE
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

16765 FISHHAWK BLVD.
#307
LITHIA, FL 33547

New Mailing Address:

FEI Number: 13-4279267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, JEFFREY M
400 NORTH ASHLEY DRIVE
SUITE 1500
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CIARDIELLO, DAVID
Address: 4418 GENTRICE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: CIARDIELLO, SUSAN
Address: 4418 GENTRICE DRIVE
City-St-Zip: VALRICO, FL 33594

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: DAVID CIARDIELLO

PRES

04/10/2006

Electronic Signature of Signing Officer or Director

_____ Date