## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000132235

Entity Name: AMBIENT LIGHTING, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2186 SPRING CREEK CIRCLE NE 2903 DUSA DR. UNIT D PALM BAY, FL 32905 MELBOURNE, FL 32934

Current Mailing Address: New Mailing Address:

2186 SPRING CREEK CIRCLE NE 2903 DUSA DR. UNIT D PALM BAY, FL 32905 MELBOURNE, FL 32934

FEI Number: 20-1642377 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MILUCKY, JAMES J CPA

1280 US HIGHWAY 1

MALABAR, FL 32950 US

JONES, KAREN A
2903 DUSA DR. UNIT D
MELBOURNE, FL 32934 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: KAREN A. JONES 05/01/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: FREUND, KAREN A Name: JONES, KAREN A

Address: 2186 SPRING CREEK CIRCLE NE Address: 2186 SPRING CREEK CIRCLE NE

City-St-Zip: PALM BAY, FL 32905 City-St-Zip: PALM BAY, FL 32905

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JONES, WILLIAM M
 Name:

 Address:
 2186 SPRING CREEK CIRCLE NE
 Address:

 City-St-Zip:
 PALM BAY, FL 32905
 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: KAREN JONES PRES 05/01/2006