2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027685

FILED Apr 25, 2007 Secretary of State

Entity Nar	ne: AIMS IN	TERACTIVE, INC.					
Current Principal Place of Business:			New Prin	New Principal Place of Business:			
	MARTIN LUT	HER KING BLVD					
220 TARPON S	SPRINGS, FL	34689					
Current Mailing Address:			New Mail	New Mailing Address:			
	MARTIN LUT	HER KING BLVD					
220 TARPON S	SPRINGS, FL	34689					
FEI Number:	20-2250637	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Des	sired ()	
Name and	Address of	Current Registered Agent	: Name and	Name and Address of New Registered Agent:			
29605 ÚS I	JNDERSON HWY 19 NOF ATER, FL 340	RTH SUITE 140 689 US					
	named entity of Florida.	submits this statement for the	ne purpose of changing	its registered o	ffice or registered age	nt, or both,	
SIGNATUF	RE:						
	Electro	nic Signature of Registered	Agent		Date		
Election Can	npaign Financi	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CADY, TOM) Delete I PLACE SUITE 450 22030	Title: Name: Address: City-St-Zip:	CADY, TOM) Change () Addition PLACE SUITE 203 22030		
Title: Name: Address: City-St-Zip:	PETERSEN, 0 905 EAST ML) Delete CHRIS KING DRIVE SUITE 220 INGS, FL 34689	Title: Name: Address: City-St-Zip:	()) Change ()Addition		
Title: Name: Address: City-St-Zip:	GARCIA, GER	I PLACE SUITE 450	Title: Name: Address: City-St-Zip:	GARCIA, GERA	PLACE SUITE 203		
Title: Name: Address: City-St-Zip:	VINCENT, JO	I PLACE SUITE 450	Title: Name: Address: City-St-Zip:	VINCENT, JOE) Change () Addition PLACE SUITE 203 22030		

I hereby certify that the information supplied with this filing does not qualify 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: CHRIS PETERSEN Ρ 04/25/2007