

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000045195

Entity Name: N2REVOLUTION, INC.

FILED  
May 10, 2006  
Secretary of State

## Current Principal Place of Business:

5289 NW 108 AVENUE  
SUNRISE, FL 33351

## New Principal Place of Business:

## Current Mailing Address:

5289 NW 108 AVENUE  
SUNRISE, FL 33351

## New Mailing Address:

FEI Number: 42-1663520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEARL, ROBIN A  
5289 NW 108 AVENUE  
SUNRISE, FL 33351 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: P ( ) Delete  
Name: PEARL, ROBIN A  
Address: 5289 NW 108 AVENUE  
City-St-Zip: SUNRISE, FL 33351 US

Title: VP ( ) Delete  
Name: ROACH, JAMES  
Address: 5289 NW 108 AVENUE  
City-St-Zip: SUNRISE, FL 33351 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: CLAWSON, JON  
Address: 5289 NW 108 AVE  
City-St-Zip: SUNRISE, FL 33351 US

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: ROBIN PEARL

P

05/10/2006

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

\_\_\_\_\_  
Date