

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104300

Entity Name: YOURONLINETECH.COM INC.

FILED  
Feb 09, 2006  
Secretary of State

**Current Principal Place of Business:**

16114 E. MEAD HILL DRIVE  
LOXAHATCHEE, FL 33470 US

**New Principal Place of Business:**

**Current Mailing Address:**

16114 E. MEAD HILL DRIVE  
LOXAHATCHEE, FL 33470 US

**New Mailing Address:**

FEI Number: 59-4527308      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GIGUERE, GABRIEL C  
16114 E. MEAD HILL DRIVE  
LOXAHATCHEE, FL 33470 US

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

GABRIEL, GIGUERE C  
16114 E. MEAD HILL DRIVE  
LOXAHATCHEE, FL 33470 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: GABRIEL C. GIGUERE      02/09/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DIR ( ) Delete  
Name: GIGUERE, GABRIEL C  
Address: 16114 E. MEAD HILL DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: P ( ) Delete  
Name: GIGUERE, GABRIEL C  
Address: 16114 E. MEAD HILL DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470 US

**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: GABRIEL C. GIGUERE      CHMN      02/09/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date