

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000109027

FILED
May 14, 2007
Secretary of State

Entity Name: INTERACTIVE ELECTRONICS INC.

Current Principal Place of Business:

21693 FALL RIVER DR.
APT. 101
BOCA RATON, FL 33428

New Principal Place of Business:

21693 FALL RIVER DR.
SUITE 101
BOCA RATON, FL 33428

Current Mailing Address:

21693 FALL RIVER DR.
APT. 101
BOCA RATON, FL 33428

New Mailing Address:

21693 FALL RIVER DR.
SUITE 101
BOCA RATON, FL 33428

FEI Number: 20-3112053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKES, ANGELA
ONE EAST BROWARD BLVD
SUITE 609
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

BUCCI LAW OFFICES, P.A.
2600 NORTH ANDREWS AVE.
WILTON MANORS, FL 33311 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: CHRISTIN BUCCI, PRESIDENT

05/14/2007

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:

Title: D () Delete
Name: NESBIT, THOMAS
Address: 21693 FALL RIVER DR.
City-St-Zip: BOCA RATON, FL 33428

Title: T (X) Delete
Name: CARDONA, MARTA T
Address: 4881 S CITATION DR NO 101
City-St-Zip: DELRAY BEACH, FL 33445

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 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: THOMAS NESBIT

D

05/14/2007

Electronic Signature of Signing Officer or Director

Date