

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131357

FILED
Apr 17, 2006
Secretary of State

Entity Name: MOBIUS INNOVATION AND DEVELOPMENT ,INC.

Current Principal Place of Business:

858 THRASHER DRIVE
VIERA, FL 32955

New Principal Place of Business:

Current Mailing Address:

858 THRASHER DRIVE
VIERA, FL 32955

New Mailing Address:

FEI Number: 20-3531686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLELLAN, TIMOTHY F
858 THRASHER DRIVE
VIERA, FL 32955 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: PVST () Delete
Name: MCLELLAN, TIMOTHY F
Address: 110 SUMMER PLACE #1
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: MCLELLAN, TIMOTHY F
Address: 110 SUMMER PLACE #1
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: MCLELLAN, DEBORAH
Address: 110 SUMMER PLACE #1
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: MCLELLAN, TIMOTHY F
Address: 858 THRASHER DR.
City-St-Zip: VIERA, FL 32955

Title: D (X) Change () Addition
Name: MCLELLAN, TIMOTHY F
Address: 858 THRASHER DR.
City-St-Zip: VIERA, FL 32955

Title: D (X) Change () Addition
Name: MCLELLAN, DEBORAH
Address: 858 THRASHER DR.
City-St-Zip: VIERA, FL 32955

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: TIMOTHY F. MCLELLAN

PVST

04/17/2006

Electronic Signature of Signing Officer or Director

Date