

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131210

FILED
Jul 11, 2008
Secretary of State

Entity Name: ACCUTRON CONTROLS INTERNATIONAL, INC.

Current Principal Place of Business:

% NANCY H. HARRIS
2408 NE 26TH AVE.
FT. LAUDERDALE, FL 33305

New Principal Place of Business:

Current Mailing Address:

% NANCY H. HARRIS
2408 NE 26TH AVE.
FT. LAUDERDALE, FL 33305

New Mailing Address:

FEI Number: 41-2216852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, NANCY M
2408 NE 26TH AVE.
FT. LAUDERDALE, FL 33305 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

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: MORAN, VICTORIA L
Address: 16111 TANA TEA CIRCLE
City-St-Zip: TEGA CAY, SC 29708

Title: VD () Delete
Name: BARRETT, JASON B
Address: 333 EMMA WOOD LN
City-St-Zip: ROCK HILL, SC 29730

Title: PD () Delete
Name: MCQUIGGIN, DAVID B
Address: 5 CRUSOE PL
City-St-Zip: INGERSOLL, ONT. CAN. N5C 4G2,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAVID B. MCQUIGGIN

PD

07/11/2008

Electronic Signature of Signing Officer or Director

_____ Date