

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000059486

FILED
Jul 14, 2008
Secretary of State

Entity Name: ACCURATE MISTING SYSTEMS INC.

Current Principal Place of Business:

1700 NOCATEE DRIVE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

1700 NOCATEE DRIVE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 59-2665377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
300 FIFTH AVE SOUTH SUITE 101-330
NAPLES, FL 34102 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: DP () Delete
Name: KIRBY, CHRISTOPHER M
Address: 1700 NOCATEE DRIVE
City-St-Zip: MIAMI, FL 33133

Title: DT () Delete
Name: KIRBY, CHARLES M
Address: 1700 NOCATEE DRIVE
City-St-Zip: MIAMI, FL 33133

Title: DS () Delete
Name: KIRBY, HELEN M
Address: 1700 NOCATEE DRIVE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: KIRBY, VANESSA
Address: 1700 NOCATEE DRIVE
City-St-Zip: MIAMI, FL 33133

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:

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: CHRISTOPHER M. KIRBY

OWNE

07/14/2008

Electronic Signature of Signing Officer or Director

Date