

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000014076

FILED
May 11, 2005
Secretary of State

Entity Name: GUILDLINE INSTRUMENTS INC.

Current Principal Place of Business:

103 COMMERCE ST.
SUITE 160
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

103 COMMERCE ST.
SUITE 160
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 59-3228005 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCEFIELD, DAVID S PA
100 EAST SPBALIA AVE STE 205
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

ANDERSON, PAULINE M TD
103 COMMERCE STREET,
STE. 160
LAKE MARY, FL 32746 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: P.M. ANDERSON

05/11/2005

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: DPS () Delete
Name: ANDERSON, ANTHONY
Address: 103 COMMERCE STREET SUITE 160
City-St-Zip: LAKE MARY, FL

Title: TD () Delete
Name: ANDERSON, PAULINE
Address: 103 COMMERCE STREET, SUITE 160
City-St-Zip: LAKE MARY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: ANDERSON, PAULINE M
Address: 103 COMMERCE STREET, SUITE 160
City-St-Zip: LAKE MARY, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: P.M.ANDERSON

TD

05/11/2005

Electronic Signature of Signing Officer or Director

Date