

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000053943

1. Entity Name
RARE EARTH SCIENCES, INC.



Principal Place of Business
**4019 E. FOWLER AVE
TAMPA, FL 33617 US**

Mailing Address
**4019 FOWLER AVE
TAMPA, FL 33617 US**



01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3256313

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STULL, R. JEFFREY
602 S BLVD
TAMPA, FL 33606**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ALBERGO, NICHOLAS
STREET ADDRESS	14103 POINT ANNE DR
CITY- ST- ZIP	ODESSA, FL 33556
TITLE	DV
NAME	SCOTT, DAVID D
STREET ADDRESS	914 SHADED WATER WAY
CITY- ST- ZIP	LUTZ, FL 33549
TITLE	D
NAME	YING, ANTHONY
STREET ADDRESS	8085 CENTRE LANE
CITY- ST- ZIP	EAST ELMHURST, NY 14051
TITLE	D
NAME	SHANNON, EARL
STREET ADDRESS	RR4
CITY- ST- ZIP	BRIGHT, ONT, CANADA, n0j1bo
TITLE	DS
NAME	LEWIS, RICHARD II
STREET ADDRESS	13966 BALD CYPRESS CIR
CITY- ST- ZIP	FORT MYERS, FL 33907
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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01/17/07-60002-013 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/07

Date

813 971 3882

Daytime Phone #