2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 27, 2006 08:00 AM Secretary of State 02212006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 59-3358738 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

Daytime Phone #

	
DOCUMENT # P96000016847	
11/1/21 16/16/81 1 M DUNCKKKK///	

1. Entity Name IB SYSTEMS, INC.

Principal Place of Business

BUBIS, IGOR

3766 PENDLEBURY DR PALM HARBOR, FL 34685

SIGNATURE:

Mailing Address

3766 PENDLEBURY DR 3766 PENDLEBURY DR PALM HARBOR, FL 34685 PALM HARBOR, FL 34685

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

THED OR PRINTED NAME I SIGNING

DO NOT WRITE IN THIS SDACE

			IN THIS SPACE		
	named entity submits this statement for the plants of registered agent.	urpose of changing its registered offi	ce or r	egistered agent, or bo	oth, in the State of Florida. I am tamiliar with, and accept
SIGNATURE_	Signature, typed or printed name of registered egent and title in	applicable. (NOTE, Registered Agent	signature	required when rollistating)	DATE
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			<u> </u>
TITLE NAME STREET AUDRESS CITY-ST-ZIP	DPS BUBIS, IGOR 3766 PENDLEBURY DR PALM HARBOR, FL				ງນຸງກ່າວນຸກ ແລະ ພຸດປະຊາຕ ຕ
Title Name Street Address City-ST-ZIP					######################################
title Name Street adoress City-St-Zip				DO	NOT WRITE
TITLE NAME STREET ADDRESS CKTY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ACORESS CITY-ST-ZIP					
Title Name Street address City-S1-ZIP					
12. I hereby of indicated of the cor changed,	cently that the information supplied with this I on this report or suppliemental report is true proration or the receipting or this time empowers , or on an attachment with an address, with all	ling does not qualify for the exemption of accurate and that my signature single execute this report as required by other like empowered.	ons co hall ha y Chap	ntained in Chapter 11 ve the same legal effe iter 607, Florida Statut	 Piorida Statutes. I further certify that the information of as if made under cath; that I am an officer or director les; and that my name appears in Block 10 or Block 11 if

DIRECTOR