

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000051674

Entity Name: MICROBURST TECHNOLOGIES, INC.

FILED
Apr 20, 2008
Secretary of State

Current Principal Place of Business:

1053 FAIRLAWN DRIVE
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

3810 MURRELL ROAD
#243
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-3453372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PACK, JANICE
2261 ROCKLEDGE DRIVE
ROCKLEDGE, FL 32955 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUAREZ, JEAN
Address: 1053 FAIRLAWN DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: V () Delete
Name: PACK, JANICE
Address: 2261 ROCKLEDGE DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: VT () Delete
Name: WEINER, WILLIAM
Address: 1305 PEPPER TREE PLACE
City-St-Zip: ROCKLEDGE, FL 32955

Title: S () Delete
Name: EDMUNDS, CHRISTINE
Address: 276 OLD FLORENCE PULASKI RD
City-St-Zip: LEOMA, TN 38468

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: JEAN M SUAREZ

P

04/20/2008

Electronic Signature of Signing Officer or Director

Date