

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000075769

Entity Name: ACCUBILL SYSTEMS, INC.

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

1380 MIAMI GARDENS DRIVE  
STE 155  
MIAMI, FL 33179 US

## New Principal Place of Business:

## Current Mailing Address:

1380 MIAMI GARDENS DRIVE  
STE 155  
MIAMI, FL 33179 US

## New Mailing Address:

FEI Number: 65-0777531

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLEINMANN, AMY  
1300 MIAMI GARDENS STREET  
MIAMI, FL 33179 US

## Name and Address of New Registered Agent:

SHAPIRO, AMY  
1380 MIAMI GARDENS DRIVE  
SUITE 155  
MIAMI, FL 33179 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: AMY SHAPIRO

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LOUGACHI, BERYL  
Address: 1380 MIAMI GARDENS DR, #165  
City-St-Zip: MIAMI, FL 33179

Title: D ( ) Delete  
Name: KLEINMAN, AMY  
Address: 1380 MIAMI GARDENS DR, #165  
City-St-Zip: MIAMI, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LOUGACHI, BERYL  
Address: 1380 MIAMI GARDENS DR, #155  
City-St-Zip: MIAMI, FL 33179

Title: D (X) Change ( ) Addition  
Name: SHAPIRO, AMY  
Address: 1380 MIAMI GARDENS DR, #155  
City-St-Zip: MIAMI, FL 33179

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: AMY SHAPIRO

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date