

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000099335

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: PROMELAS RESEARCH CORPORATION

## Current Principal Place of Business:

235 6TH ST NW  
#204  
WINTER HAVEN, FL 33881

## New Principal Place of Business:

## Current Mailing Address:

235 6TH ST NW  
#204  
WINTER HAVEN, FL 33881

## New Mailing Address:

FEI Number: 59-3485825      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMPSON, SCOTT  
5001 ELROSE LOOP RD  
WINTER HAVEN, FL 33884      US

## Name and Address of New Registered Agent:

THOMPSON, SCOTT  
5001 ELIOSE LOOP RD  
WINTER HAVEN, FL 33884      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:

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: THOMPSON, SCOTT K  
Address: 5001 ELIOSE LOOP RD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: V ( ) Delete  
Name: VITTONI, RAF  
Address: 315 RUBY LAKE LOOP  
City-St-Zip: WINTER HAVEN, FL 33884

Title: ST ( ) Delete  
Name: VITTONI, EARLENE  
Address: 235 6TH ST #204  
City-St-Zip: WINTER HAVEN, FL 33881

Title: D ( ) Delete  
Name: VITTONI, DANTE  
Address: 1832 WOODPOINT DRIVE  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete  
Name: TILLMAN, TIMOTHY  
Address: 546 AVE G SE  
City-St-Zip: WINTER HAVEN, FL 33880

## 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:

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: EARLENE VITTONI

ST

04/27/2007

Electronic Signature of Signing Officer or Director

Date