2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006
Secretary of State

DOCUMENT# P98000036079

Entity Name: POLLUX INTERNATIONAL, INC.

Current Principal Place of Business:

8177 N ATLANTIC AVE
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

8177 N ATLANTIC AVE
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 59-3505839 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARC S. STEINBERG, P.A.
1980 NORTH ATLANTIC AVE
STE 405
COCOA BEACH, FL 32931 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: PD ( ) Delete
Name: KUBBE, GUNTER
Address: 300 COLUMBIA DR APT 3401
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VD ( ) Delete
Name: KUBBE, MARITA
Address: 300 COLUMBIA DR APT 3401
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: MD ( ) Delete
Name: WAX, JEFFREY
Address: 3873 S BANANA RIVER BLVD APT 402
City-St-Zip: COCOA BEACH, FL 32931

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY WAX MD 01/20/2006

Electronic Signature of Signing Officer or Director — Date