2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063834

Entity Name: SENSE HOLDINGS, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4503 NW 103RD AVE 10871 NW 52ND STREET

STE 200 STE 2

SUNRISE, FL 33351 SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

4503 NW 103RD AVE 10871 NW 52ND STREET **STE 200** STE 2

SUNRISE, FL 33351 SUNRISE, FL 33351

FEI Number: 65-0859753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOLDRICH, ANDREW PERLER, DORE 4503 NW 103RD AVE 10871 NW 52ND STREET

STE 200 STE 2 SUNRISE, FL 33351 US SUNRISE, FL 33351 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: DORE PERLER 05/01/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete PERLER, DORE PERLER, DORE Name: Name:

4503 NW 103RD AVE STE 200 Address: 10871 NW 52ND STREET STE 2 Address:

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

Title: Title: () Delete (X) Change () Addition

TARTAGLIA, SHAWN TARTAGLIA, SHAWN Name: Name:

4503 NW 103RD AVE STE 200 10871 NW 52NS STREET STE 2 Address: Address:

SUNRISE, FL 33351 SUNRISE, FL 33351 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete D

SLATER, JULIE Name: SLATER, JULIE Name:

4503 NW 103RD AVE STE 200 Address: 10871 NW 52NS STREET STE 2 Address

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

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: DOER PERLER D 05/01/2007