2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000072129

Name:

Address: City-St-Zip: SLATER, JULIE

402 NW 118TH TERRACE

CORAL SPRINGS, FL 33071

Entity Name: MICRO SENSOR TECHNOLOGIES INC.

FILED Apr 27, 2008 Secretary of State

Littly Nan	ie. WICKO SE	NOOR TECHNOLOGIES, INC			
Current Principal Place of Business:			New Principal F	New Principal Place of Business:	
10871 NW 52ND STREET STE 200 SUNRISE, FL 33351			STE 2	10871 NW 52ND STREET STE 2 SUNRISE, FL 33351	
Current Ma	ailing Address	:	New Mailing Ad	New Mailing Address:	
10871 NW 52ND STREET SUNRISE, FL 33351			2	10871 NW 52ND STREET 2 SUNRISE, FL 33351	
FEI Number:	59-3603520	FEI Number Applied For ()	FEI Number Not Applicable		
Name and Address of Current Registered Agent:			Name and Addr	Name and Address of New Registered Agent:	
PERLER, DORE 10871 NW 52ND STREET STE 200 SUNRISE, FL 33351 US			10871 NW 52ND STE 2	PERLER, DORE 10871 NW 52ND STREET STE 2 SUNRISE, FL 33351 US	
The above in the State		Ibmits this statement for the pu	urpose of changing its regi	stered office or registered agent, or both,	
SIGNATURE:				04/27/2008	
Election Carr		Signature of Registered Ager Trust Fund Contribution ().	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO ()[PERLER, DORE 9400 SW 49TH F COOPER CITY, I	PLACE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	VP ()[TARTAGLIA, SHA 6888 ASHBURN LAKE WORTH, F	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DORE PERLER CEO 04/27/2008