


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 08:00 A
Secretary of State

DOCUMENT # V65830
 1. Entity Name
AI INSIGHT, INC.



Principal Place of Business 4901 VINELAND RD. STE. 450 ORLANDO, FL 32811 US	Mailing Address 4901 VINELAND RD. STE. 450 ORLANDO, FL 32811 US
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DO NOT WRITE IN THIS SPACE



03202007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3145074	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EPSTEIN, STEVE
 4901 VINELAND RD.
 STE. 450
 ORLANDO, FL 32811

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00-

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REIFSNYDER, EDWARD F 4901 VINELAND RD., STE. 450 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD EPSTEIN, STEVEN M 4901 VINELAND RD., STE. 450 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENNING, HARRY L 4901 VINELAND RD., STE. 450 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEE, J. DIANE 4901 VINELAND RD., STE. 450 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/17/07-80071-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **STEVE EPSTEIN** **APRIL 3, 2007** **321-281-4480**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #