2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006 8:00 am
Secretary of State
02-02-2006 90080 014 ***150.00

DOCUMENT # H91248

1. Entity Name
SOUTH FLORIDA ENERGY, INC.

Principal Place of Business	Mailing Address
MARKOWITZ FENELON & BANK, LLP 300 PANTIGO PLACE, SUITE 109 EAST HAMPTON, NY 11937	MARKOWITZ FENELON & BANK, LLP 300 PANTIGO PLACE, SUITE 109 EAST HAMPTON, NY 11937

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01102006 Chg-P CR2E034 (11/05)

4. FEI Number 65-0001794 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FENELON, DAVID
% SHAW AERO DEVICES
12291 TOWNE LAKE DRIVE
FT. MYERS, FL 33913

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD VOULIERIS, MICHAEL 1420 SHERBROOKE ST. WEST MONTREAL,QUEBEC, CAN,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Voulieris, Michael 4060 Ste Catherine Street West,Suite 605 Westmount,Quebec Canada H3Z 2Z3	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TERYAZOS, LEONTIS 1420 SHERBROOKE ST. WEST MONTREAL,QUEBEC, CAN,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Teryazos, Leontis 4060 Ste Catherine Street West, Suite 605 Westmount, Quebec, Canada H3Z 2Z3	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] 16 JAN 2006
SIGNATURE AND TYPED OR ~~PRINTED NAME OF SIG~~NING OFFICER OR DIRECTOR — Date — Daytime Phone #