## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Mar 19, 2004 8:00 am **Secretary of State** DOCUMENT # M43936 1. Entity Name 03-19-2004 90072 001 \*\*\*300 00 PANTROPIC POWER PRODUCTS, INC. Principal Place of Business Mailing Address 8205 N.W. 58TH STREET 8205 N.W. 58TH STREET **MIAMI FL 33166** MIAMI FL 33166 66406764 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-2749643 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOTAS, LUIS Street Address (P.O. Box Number is Not Acceptable) 8205 N.W. 58TH STREET MIAMI FL 33166 City 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE Change BOTAS, LUIS NAME NAME 3205 nw 584 5 Treet 12725 SW 101 TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAIMI FL CITY-ST-ZIP migmi, FL. 33166-3406 **CFOS** TITLE ☐ Delete TITLE Change Addition 3205 nw 58th 37reed CABRERA, FERNANDO NAME NAME 1903 NW 137 TERRACE STREET ADDRESS STREET ADDRESS mam, FL 33166-3406 PEMBROKE PINES FL 33028 CITY-ST-ZIP City-ST-7/P TITLE Delete TITLE Change **▼** Addilion Robert Kelly, JR. NAME NAME BROS NW 58 th 5 Treet STREET ADDRESS STREET ADDRESS CITY-ST-ZIP mam, FL 33166-3400 CITY-ST-ZIP Dwechan ☐ Change TITLE ☐ Delete TITLE Addition Kennew Geimes NAME 3205 nw 584 0 Treed STREET ADDRESS STREET ADDRESS miami, FL 33166-3406 CITY-ST-ZIP CITY-ST-ZiP Addition Director Change ☐ Delete TITLE TITLE NAME NAME CHRIDADEL VARTIONIGY STREET ADDRESS STREET ADDRESS B205 nw 58 m 57566 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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. Feerando Caberra SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

CITY-ST-ZIP