2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 08:00 AN
Secretary of State

ANNUAL REPORT						
DOCUMENT # M43936 1. Entity Name PANTROPIC POWER, INC.	77777 (14.4 7 + 2.7) , , , , , , , , , , , , , , , , , ,					
Principal Place of Business 8205 N.W. 58TH STREET MIAMI, FL 33166	Mailing Address 8205 N.W. 58TH STREET MIAMI, FL 33166	in the second second				



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

01062006 No Chg-P CR2E034 (11/05)

4. FEI Number | Applied For | 59-2749643 | Not Applicable | \$8.75 Additional

BOTAS, LUIS 8205 N.W. 58TH STREET MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE

 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 tide if applicable (NOTE. Registered Agent signature required when reinstating) DATE						
	E NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees	Distribution of the Control of the C	
10.	OFFICERS AND DIREC	TORS			And the state of t	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOTAS, LUIS 8205 NW 58TH ST. MIAMI, FL 331663406	2, , ,			11000000381367 01/11/06-80051-011 158.75	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	CFOS CABRERA, FERNANDO 8205 NW 58TH ST. MIAMI, FL 331663406					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, ROBERT JR. 8205 NW 58TH ST. MIAMI, FL 331663406		DO NOT WRITE			
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D VARTIANIAN, CHRISTABEL 8205 NW 58TH ST. MIAMI, FL 331663406			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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						