

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115049

FILED  
May 15, 2009  
Secretary of State

Entity Name: EP3 SYSTEMS INC.

**Current Principal Place of Business:**

12525 ORANGE DRIVE  
STE 703  
DAVIE, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

12525 ORANGE DRIVE  
STE 703  
DAVIE, FL 33330

**New Mailing Address:**

FEI Number: 83-0372695      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROMANIELLO, ANTHONY  
12525 ORANGE DRIVE  
STE 703  
DAVIE, FL 33330 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: ROMANIELLO, ANTHONY  
Address: 3582 SOUTHERN ORCHARD RD  
City-St-Zip: DAVIE, FL 33328

Title: D ( ) Delete  
Name: CADIZ, MARIA B  
Address: 19427 N. COQUINA WAY  
City-St-Zip: WESTON, FL 33332

Title: D ( ) Delete  
Name: ROMANIELLO, LINDA  
Address: 3582 SOUTHERN ORCHARD RD.  
City-St-Zip: DAVIE, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ANTHONY ROMANIELLO

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05/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date