

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000101010

**FILED**  
**Feb 19, 2009**  
**Secretary of State**

**Entity Name:** POWER 101 INC

**Current Principal Place of Business:**

2101 CRYSTAL DRIVE  
FT MYERS, FL 33907 US

**New Principal Place of Business:**

2753 5TH AVENUE SOUTH  
ST. PETERSBURG, FL 33712 US

**Current Mailing Address:**

5545 WHISPERING WILLOW WAY  
FT MYERS, FL 33908 US

**New Mailing Address:**

2753 5TH AVENUE SOUTH  
ST. PETERSBURG, FL 33712 US

**FEI Number:** 26-3713685

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAPE COD MGMT SVC INC  
314 NE 27TH STREET  
WILTON MANORS, FL 33334 US

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

RASHEED, SWAPNA  
2753 5TH AVENUE SOUTH  
ST. PETERSBURG, FL 33712 US

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: SWAPNA, RASHEED

02/19/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FARAJ, SHAR  
Address: 5545 WHISPERING WILLOW WAY  
City-St-Zip: FT MYERS, FL 33908 US

Title: VP (X) Delete  
Name: RASHEED, SWAPNA  
Address: 5545 WHISPERING WILLOW WAY  
City-St-Zip: FT MYERS, FL 33908 US

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

Title: P (X) Change ( ) Addition  
Name: RASHEED, SWAPNA  
Address: 2753 5TH AVENUE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712 US

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: SWAPNA, RASHEED

PRES

02/19/2009

Electronic Signature of Signing Officer or Director

Date