2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 26, 2007 08:00 AM **DOCUMENT # 420068 Secretary of State** 1. Entity Name SUN POWER DIESEL, INC. Mailing Address Principal Place of Business HARBOUR TOWNE MARINA HARBOUR TOWNE MARINA 833 N.E. 3RD STREET 833 N.E. 3RD STREET DANIA BEACH, FL 33004 DANIA BEACH, FL 33004 CR2E034 (11/05) 02152007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1485453 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAVIS, JOHN J. DO NOT WRITE 833 NE 3RD STREET **DANIA, FL. 33004** 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. DATE Signature, typed or printed name of registered agent and title it applicable (NOTE, Registered Agent signature required when reinstaling) 1000000647109 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 43745707-80059-007 **158.75** Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DP TITLE DAVIS. JOHN J NAME STREET ADDRESS 833 NE 3RD ST CITY-81-72 DANIA BEACH, FL 33004 TITLE DAVIS, ALICIA STREET ADDRESS 833 NE 3RD ST CITY-ST-7/2 DANIA BEACH, FL 33004 TITLE HAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAM: STREET ADDRESS CITY-ST-ZIP BBF

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:

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

Alicia Davis

2-15-07

954-237-2200

FILED

Date

Deytime Phone #