2006 FOR PROFIT CORPORATION

May 01, 2006 8:00 am Secretary of State ANNUAL REPORT 05-01-2006 90417 029 ***150.00 DOCUMENT # F00000002253 BATTERY ACQUISITION & DEVELOPMENT, INC. Principal Place of Business Mailing Address 40076596 12770 MERIT DR., SUITE 400 12770 MERIT DR., SUITE 400 DALLAS, TX 75251 DALLAS, TX 75251 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172006 Chq-P CR2E034 (11/05) City & State City & State Applied For 4. FEI Number 75-2837665 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change Addition NAME HOLFORD, NEAL 12770 MERIT DR., SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75251 CITY-ST-ZIP VSTD TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME HOLMES, WALTER C III NAME 12770 MERIT DR., SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75251 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HUNTSBERRY, LISA NAME NAME 12770 MERIT DRIVE, SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75251 CITY-ST-ZIP PD TITLE ☐ Delete TITI F □ Change Addition NAME NAME ALEX LOUIS STREET ADDRESS STREET ADDRESS 12770 merit Dr. 4400 CITY-ST-ZIP CITY-ST-ZIP Dallasitx 75251 TITLE ☐ Delete TITLE □ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 redeiver or trustee employered 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 attache

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Alex Louis OR PRINTED NAME OF SIGNING OFFICE

FILED