


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 24, 2007 8:00 am
Secretary of State

01-24-2007 90047 044 ***158.75

DOCUMENT # F00000003619	
1. Entity Name PROTOGATE, INC.	

Principal Place of Business 12225 WORLD TRADE DRIVE SUITE R SAN DIEGO CA 92128 US	Mailing Address P.O. BOX 503313 SAN DIEGO CA 92150-3313 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E034 (10/06)

City & State	City & State
Zip	Country

4. FEI Number 33-0897836	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SANDIN, MR. DEAN M 3645 NW 5TH AVENUE BOCA RATON FL 33431	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL 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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. <input type="checkbox"/> Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	CP LOOS, ERIC H 8918 SIX RIVERS LANE MISSOURI CITY TX 77459 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	DV GIBBONS, JEFFREY A 311 BRIDLE WAY PORT TOWNSEND WA 98368 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	DV LAFRANCE, ROGER J 10623 ESCOBAR DRIVE SAN DIEGO CA 92124 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	DV SANDIN, DEAN M 3645 NW 5TH AVENUE BOCA RATON FL 33431 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	DV RIDEG, FRANK III 9356 LAURENTIAN DRIVE SAN DIEGO CA 92129 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	DT ROCCO, WILLIAM K 14042 SADDLEWOOD DRIVE POWAY CA 92064 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	DS WITTE, Theodore P. 827 Summerhill COURT ENCINITAS, CA 92024 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: William K Rocco William K. Rocco 1/19/07 (858) 451-0865x114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #