

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002007

Entity Name: THERMO LIFE ENGERY CORP.

FILED
Jun 28, 2007
Secretary of State

Current Principal Place of Business:

1690 SOUTH CONGRESS AVE
SUITE 200
DELRAY BEACH, FL 33445

New Principal Place of Business:

1660 CHICAGO AVENUE
SUITE P2
RIVERSIDE, CA 92507

Current Mailing Address:

C/O APPLIED DIGITAL SOLUTIONS, INC
1690 SO CONGRESS AVE SUITE 200
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 06-1633224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGSFORD-LOVELAND, KAY
1690 SOUTH CONGRESS AVE
SUITE 200
DELRAY BEACH, FL 33445 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: P () Delete
Name: POULSHOCK, MARC
Address: 1690 SOUTH CONGRESS AVE SUITE 200
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: SILVERMAN, SCOTT
Address: 1690 SOUTH CONGRESS AVE SUITE 200
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD () Delete
Name: MCLAUGHLIN, KEVIN H
Address: 1690 SOUTH CONGRESS AVE SUITE 200
City-St-Zip: DELRAY BEACH, FL 33445

Title: ST (X) Delete
Name: MCKEOWN, EVAN
Address: 1690 SOUTH CONGRESS AVE SUITE 200
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POULSHOCK, MARC
Address: 1660 CHICAGO AVENUE, SUITE P2
City-St-Zip: RIVERSIDE, CA 92507

Title: DVPS (X) Change () Addition
Name: LANGSFORD, KAY E
Address: 1690 SOUTH CONGRESS AVE SUITE 200
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPT (X) Change () Addition
Name: BREECE, LORRAINE
Address: 1690 SOUTH CONGRESS AVE SUITE 200
City-St-Zip: DELRAY BEACH, FL 33445

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: KAY E. LANGSFORD

VP

06/28/2007

Electronic Signature of Signing Officer or Director

Date