2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# F02000002007

Entity Name: THERMO LIFE ENGERY CORP.

Current Principal Place of Business:

1660 CHICAGO AVENUE
SUITE P2
RIVERSIDE, CA 92507

New Principal Place of Business:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LORRAINE BREECE VP 04/27/2008
Electronic Signature of Signing Officer or Director — Date