2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# F02000003392

Entity Name: BLAST DEFLECTORS, INC.

Current Principal Place of Business:

5595 EQUITY AVE., SUITE 650
RENO, NV 89502

New Principal Place of Business:

Current Mailing Address:

5595 EQUITY AVE., SUITE 650
RENO, NV 89502

New Mailing Address:

FEI Number: 94-6091026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UCC FILING & SEARCH SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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: CEO ( ) Delete
Name: LYNN, CHRISTOPHER G
Address: 5835 STRASBOURG CT.
City-St-Zip: RENO, NV 89511

Title: ST ( ) Delete
Name: LYNN, CHRISTOPHER G
Address: 5835 STRASBOURG CT.
City-St-Zip: RENO, NV 89511

Title: P ( ) Delete
Name: BOE, MARK
Address: 5595 EQUITY AVE., STE 600
City-St-Zip: RENO, NV 89502

Title: D ( ) Delete
Name: LYNN, WHITNEY G
Address: 1649 ABBOTSBURY ST
City-St-Zip: LAKE SHERWOOD, CA 91361

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:

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: MARK BOE PRES 01/14/2009

Electronic Signature of Signing Officer or Director — Date