2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000471

Entity Name: SOLOMON TECHNOLOGIES, INC.

FILED Aug 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1400 L & R INDUSTRIAL BLVD. TARPON SPRINGS, FL 34689 **Current Mailing Address: New Mailing Address:** 1400 L & R INDUSTRIAL BLVD. TARPON SPRINGS, FL 34689 FEI Number: 52-1812208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition TETHER, DAVID E DEVECCHIS, PETER W PRESIDE Name: Name: PO BOX 140 1400 L&R INDUSTRIAL BLVD Address: Address: City-St-Zip: BENEDICT, MD 20612 City-St-Zip: TARPON SPRINGS, FL 34689 VC Title: Title: () Delete (X) Change () Addition Name: LINDAHL. DAVE Name: STAFFORD, JAMMIE L MANAGER 8716 RUNNING FOX CT 1400 L&R INDUSTRIAL BLVD Address: Address: FAIRFAX, VA 22039 TARPON SPRINGS, FL 34689 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition POYAS, ANNE Name: Name: 1102 MARINA DR Address: Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: (X) Delete Title: () Change () Addition DEGROOT, BARRY Name: Name: Address: 2310 COLONY CT Address: City-St-Zip: PITTSBURGH, PA 15237 City-St-Zip: Title: Title: (X) Delete () Change () Addition JAMES, DON Name: Name: 390 S HUDSON ST. NUMBER 7 Address: Address: City-St-Zip: DENVER, CO 80206 City-St-Zip: Title: (X) Delete Title: () Change () Addition TETHER, CYNTHIA Name: Name: Address: PO BOX 140 Address: City-St-Zip: City-St-Zip: BENEDICT, MD 20612

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMMIE STAFFORD ST 08/26/2005