

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F04000001526

Entity Name: IPOWERRUP, INC.

**FILED**  
**Oct 27, 2006**  
**Secretary of State****Current Principal Place of Business:**1515 N FEDERAL HWY  
SUITE 300  
BOCA RATON, FL 33432**New Principal Place of Business:****Current Mailing Address:**1515 N FEDERAL HWY  
SUITE 300  
BOCA RATON, FL 33432**New Mailing Address:**

FEI Number: 65-0833465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**VALENTINE, MICHAEL L MR.  
11630 NW 35TH CT.  
CORAL SPRINGS, FL 33065 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

**OFFICERS AND DIRECTORS:**Title: PRES ( ) Delete  
Name: VALENTINE, MICHAEL L  
Address: 1515 N FEDERAL HWY, SUITE 300  
City-St-Zip: BOCA RATON, FL 33432 USTitle: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: VP ( ) Change (X) Addition  
Name: VALENTINE, KRISTOFER L  
Address: 1515 N FEDERAL HWY, SUITE 300  
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL L. VALENTINE

PRES

10/27/2006

Electronic Signature of Signing Officer or Director

Date