2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001539

Address:

City-St-Zip:

Entity Name: PUMP INTEGRATION, INC.

FILED Apr 27, 2007 Secretary of State

Entity Nar	me: PUMP IN	ITEGRATION, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1700 NOR EASTON,		STREET, SUITE F				
Current Mailing Address:			New Mailing Address:			
1700 NOR EASTON,		STREET, SUITE F				
FEI Number:	: 42-1578987	FEI Number Applied For()	FEI Number Not Appl	icable () Ce	ertificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
3330 JADE	BARRY NTEGRATION E WOOD CIR(SPRINGS, FL	ÖLE				
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office	e or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			ent	Date		
Election Car	npaign Financir	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PC (GRUSS, ANDF 600 BARNYAF EASTON, PA	DVIEW	Title: Name: Address: City-St-Zip:	() Cha	ange () Addition	
Title: Name: Address: City-St-Zip:	VC (KANE, CHRIS 11 LAKCAWAI DALLAS, PA		Title: Name: Address: City-St-Zip:	VC (X) Cha KANE, CHRIS 11 LACKAWANNA A DALLAS, PA 18612		
Title: Name: Address: City-St-Zip:	STRAUB, BAR 3330 JADEWO		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition	
Title: Name:	() Delete	Title: Name:	T () Cha	ange (X) Addition	

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.

Address:

City-St-Zip:

1584 SURREY ROAD

BETHLEHEM, PA 18015

SIGNATURE: ANDREW W. GRUSS PRES 04/27/2007