## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000003895

Address:

City-St-Zip:

545 E WELLS ST #702

MILWAUKEE, WI 53202

Entity Name: STORAGE BATTERY SYSTEMS, INC.

FILED Feb 28, 2008 Secretary of State

•		· · · · - · · · · · · · · · · · · ·		
Current Principal Place of Business:			New Principal Place of Business:	
	665 RIDGEWO NEE FALLS, W			
Current Mailing Address:			New Mailing Address:	
	665 RIDGEWO NEE FALLS, W			
FEI Number: 39-0992600 FEI Number Applied For		FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	ırrent Registered Agent:	Name and Address	of New Registered Agent:
3505 WHI SARASOT	A, FL 34242	US	surnoco of changing its registers	ed office or registered agent, or both,
	e of Florida.	abilitis tilis statement for the p	dipose of changing its registers	ed office of registered agent, or both,
SIGNATUI	RE:			
	Electroni	c Signature of Registered Age	ent	Date
Election Ca	mpaign Financing	Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	CP ( ) RUBENZER, SC 4565 N CALHOU BROOKFIELD, V	N ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VC () RUBENZER, WII 7120 N BEACH F FOX POINT, WI	RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () RUBENZER, RO 3505 WHITE LN SARASOTA, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	DST () MUELLER, JEAN W147 S7138 DU MUSKEGO, WI	IRHAM DR.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D () MUELLER, MAX	Delete	Title: Name:	( ) Change ( ) 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:

SIGNATURE: SCOTT RUBENZER PRES 02/28/2008