
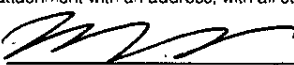


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2007 08:00 A
Secretary of State

DOCUMENT # F05000006008 1. Entity Name MOLTECH POWER SYSTEMS, INC.		
Principal Place of Business 1908 NW 67TH PLACE GAINESVILLE, FL 32653		Mailing Address 1908 NW 67TH PLACE GAINESVILLE, FL 32653
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BRASHEAR & ASSOC., P.L. 926 NW 13TH STREET GAINESVILLE, FL 32601		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C FAN, XIAN 1908 NW 67TH PLACE GAINESVILLE, FL 32653	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC WANG, YAPING 1908 NW 67TH PLACE GAINESVILLE, FL 32653	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KAM, SUN-CHU EDSON 1908 NW 67TH PLACE GAINESVILLE, FL 32653	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SUN, LI 1908 NW 67TH PLACE GAINESVILLE, FL 32653	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  LI SUN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



02202007 No Chg-P CR2E034 (11/05)

4. FEI Number 16-1625250	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

U00000649898
03/07/07-80070-022 158.75

**DO NOT WRITE
IN THIS SPACE**

Feb. 20, 2007 (352) 264-9850 x416
Date Daytime Phone #