2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 10, 2007 08:00 AM Secretary of State DOCUMENT # F05000007344 CVP SYSTEMS INTERNATIONAL, INC. Principal Place of Business Mailing Address 2518 WISCONSIN AVENUE 2518 WISCONSIN AVENUE DOWNERS GROVE, IL 60515 DOWNERS GROVE, IL 60515 No Chg-P CR2E034 (11/05) 06282007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-3186229 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PCEO TEFLE NAME MYKLEBY, LAURIE G STREET ADDRESS 3971 GULF SHORE BLVD., PH 105 CITY-ST-ZIP NAPLES, FL 34103 सार U00000767514 07/10/07-80007-014 550.00 NAME MYKLEBY, LAURIE G STREET ADDRESS 3971 GULF SHORE BLVD., PH 105 CITY-ST-7IP NAPLES, FL 34103 TITLE BORK, WESLEY P JR. NAME STREET ADDRESS 4300 N. OCEAN BLVD., #10K DO NOT WRITE CITY-ST-ZIP FT. LAUDERDALE, FL 33308 IN THIS SPACE TITLE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filling 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.

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CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-782

Wesley P. Bork, Jr.

6-29-07

630-852-1190

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #