

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90206 018 ***150.00

DOCUMENT # F06000000792 1. Entity Name AEB TECHNOLOGIES, INC.			
Principal Place of Business 4160-K TECHNOLOGY DR. FREMONT, CA 94538		Mailing Address 4160-K TECHNOLOGY DR. FREMONT, CA 94538	
2. Principal Place of Business - No P.O. Box # AEB Technologies/ Digitron Electronics 9619 W. Yulee Dr. Homosassa, FL 34448		3. Mailing Address 4160-B Technology Dr. Fremont, Ca. 94538	
4. FEI Number 68-0390188		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BURLEY, ALLEN 9619 W. YULEE DRIVE HOMOSASSA, FL 34448		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 ALLEN BURLEY		CEO/President DATE 4/10/07	
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTC BURLEY, ALLEN 4727 MC HENRY GATEWAY PLEASANTON, CA 94566 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: ALLEN BURLEY CEO/President		Date 4/10/07 Daytime Phone # (510) 979-9971	