2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2008 08:00 A Secretary of State

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DOCUMENT # F9400006361 1. Entity Name MARCH ELECTRONICS, INC.				Secr	retary of St	
Principal Place 25 FELDLAN BOHEMIA, NY	G ST.	Mailing Address 25 FELDLANG ST. BOHEMIA, NY 11716		 		11/4
DO NOT WRITE IN THIS SPAC			CE	02262008 No Chg-P CR2E034 (11/05) 4. FEI Number		
6. Name and Address of Current Registered Agent MENDELSON, STEVEN 209 MOSS ROAD N. 201 WINTER SPRINGS, FL 32703				DO NOT		
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. It 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 agreeting when renalizing) OATE FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.						
After Ma	ay 1, 2008 Fee will be \$550.0	Trust Fund Contribution.	A00	led to Fees		
10.	OFFICERS AND E	DIRECTORS			<u></u>	<u> </u>
TITLE NAME STREET ADDRESS CITY+ST-ZIP	P VILARDI, JOHN 16 RUTH PL. PLAINVIEW, NY 11803			()(()3/1	0000084579 3/08-80002	7 -012 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NO	r writ	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS	SPAC	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE			1		·	

12. I hereby certify that the information supplied with this filing does not qualify for the exemutions 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:

STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-08 (631) 563-6000

Daylane Phone #

Date