2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000754

Entity Name: BIOMASS PROCESSING TECHNOLOGY, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
3222 COM	MERCE PL			
STE A	IIVILINOLTL			
WEST PA	LM BEACH, FL	. 33407		
Current Mailing Address:			New Mailing Address:	
3222 COM	MERCE PL			
STE A	LMADEAGLLEL	22407 110		
WESTPA	LM BEACH, FL	. 33407 US		
FEI Number	: 65-0638890	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
12871 CO	LARRY W MPTON RD CHEE, FL 334	170 US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATUI	RF [.]			
0.0.0.		ic Signature of Registered Ag	ent	 Date
Election Car		Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () MCDONALD, SA 3913 SW 5TH F CAPE CORAL,	PL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () MACALLISTER, 7515 E 30TH S' INDIANAPOLIS,	Т	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () DENNEY, PEGO 12871 COMPTO LOXAHATCHEE	ON RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PCD () DENNEY, LARF 12871 COMPTO LOXAHATCHEE	DM RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	S () KENDALL, ROE		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: LARRY W DENNEY PCD 04/30/2008

City-St-Zip: WELLINGTON, FL 33414