2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# F99000004253

Entity Name: POWER FLOW SYSTEMS INC.

Current Principal Place of Business:

1585 AVIATION CENTER PARKWAY, HANGAR 804
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

1585 AVIATION CENTER PARKWAY, HANGAR 804
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 59-3468516 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, ROBIN
1585 AVIATION CENTER PKWY, HANGER 804
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: TILMAN, DARREN
Address: 1505 CASEY LN
City-St-Zip: PORT ORANGE, FL 32129

Title: D ( ) Delete
Name: DAVIS, GEOFFREY
Address: 1997 HAWKS NEST DR.
City-St-Zip: PORT ORANGE, FL 32128

Title: P ( ) Delete
Name: THOMAS, ROBIN
Address: 3301 JOHN ANDERSON DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: S ( ) Delete
Name: ROSEMARIE, FRANCKE
Address: 3301 JOHN ANDERSON DR.
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROBIN THOMAS P 01/15/2009

Electronic Signature of Signing Officer or Director — Date