## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J57806

400 PINECREST RD

MOUNT DORA, FL 32757

Address: City-St-Zip: K W POWER TECHNOLOGY INC

FILED Jul 21, 2005 Secretary of State

Entity Name: K W POWER TECHNOLOGY, INC.					
Current Pr	incipal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
775 KIRKM SUITE 111 ORLANDO			775 S. KIRKMAN ROAD SUITE 111 ORLANDO, FL 32811		
Current Ma	ailing Addre	ess:	New Mailing Address:	New Mailing Address:	
775 KIRKM SUITE 111 ORLANDO			775 S. KIRKMAN ROAD SUITE 111 ORLANDO, FL 32811		
FEI Number:	59-2771232	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
GRIGGS, WALTER C 775 KIRKMAN ROAD SUITE 111 ORLANDO, FL 32811 US			GRIGGS, WALTER C 775 S. KIRKMAN ROAD SUITE 111 ORLANDO, FL 32811 L	775 S. KIRKMAN ROAD	
The above in the State		submits this statement for the p	ourpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE: WALTER C. GRIGGS				07/21/2005	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS	AND DIREC	CTORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( GRIGGS, WAI 836 ROYALW OVIEDO, FL	OOD LANE	Title: ( ) Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( GRIGGS, LAU 836 ROYALW OVIEDO, FL	OOD W	Title: ( ) Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	D ( ROWIN, EDW	) Delete 'ARD	Title: ( ) Name:	) Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: WALTER C. GRIGGS D 07/21/2005