


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # K10408 1. Entity Name STORAGE POWER, INC.	
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Principal Place of Business 6950 PHILLIPS HWY STE 15 JACKSONVILLE, FL 32216	Mailing Address 6950 PHILLIPS HWY STE 15 JACKSONVILLE, FL 32216
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DO NOT WRITE IN THIS SPACE



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2866447	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RAX CO. 50 N LAURA ST. STE. 3300 JACKSONVILLE, FL 32202

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MORALES, RICARDO JR 6950 PHILIPS HWY, STE 15 JACKSONVILLE, FL 32216
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ARMSTRONG, COLLIN W L 116 LAUREL CT PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP KING, T. FITCH I 6950 PHILIPS HWY, STE 15 JACKSONVILLE, FL 32216
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 03/12/04-80025-010 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  R. Morales, Jr, President 3/10/04 (904)296-3232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #