
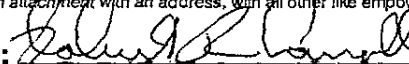


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # K83308</b> 1. Entity Name <b>POWELL ELECTRONICS WASHINGTON, INC.</b>			
Principal Place of Business <b>3540 W. PROSPECT RD. FORT LAUDERDALE, FL 33309</b>		Mailing Address <b>4848 S. ISLAND RD PHILADELPHIA, PA 19153</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
		02042005 No Chg-P CR2E034 (10/03)	
		4. FEI Number <b>52-0787395</b>	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>8. Name and Address of Current Registered Agent</b>			
<b>MCGAIN, TREVOR 3540 W. PROSPECT RD. FT. LAUDERDALE, FL 33309</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
9. 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retesting)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>10. OFFICERS AND DIRECTORS</b>			
TITLE	D		
NAME	WOLFSON, MERLE A		
STREET ADDRESS	1 S. BROAD ST., STE 2100		
CITY-ST-ZIP	PHILADELPHIA, PA 19107		
TITLE	DP		
NAME	SCHILLING, ERNEST		
STREET ADDRESS	4848 S ISLAND ROAD		
CITY-ST-ZIP	PHILADELPHIA, PA 19153		
TITLE	D		
NAME	CONNOLLY, CHARLES P JR		
STREET ADDRESS	655 JOSPEH DR		
CITY-ST-ZIP	WAYNE, PA 19087		
TITLE	V		
NAME	CARROLL, ROBERT R		
STREET ADDRESS	4848 S ISLAND ROAD		
CITY-ST-ZIP	PHILADELPHIA, PA 19153		
TITLE	D		
NAME	NEWMAN, STUART		
STREET ADDRESS	4845 TENNIS CIRCLE		
CITY-ST-ZIP	LANSDALE, PA 19446		
TITLE	D		
NAME	KICAK, EDWARD		
STREET ADDRESS	1056 MILLBROOK RD		
CITY-ST-ZIP	BERWYN, PA 19312		
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 807, 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.			
<b>SIGNATURE:</b>  <b>ROBERT R</b>		<b>3/10/05 915-937-7111</b>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	