

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033281

Entity Name: I POWER SYSTEMS LLC

FILED
Jun 30, 2005
Secretary of State

Current Principal Place of Business:

1307 BRENTWOOD HILLS BLVD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

1307 BRENTWOOD HILLS BLVD
BRANDON, FL 33511

New Mailing Address:

FEI Number: 56-2414747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TACIC, MICHAEL
1307 BRENTWOOD HILLS BLVD
BRANDON, FL 33511 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BROWN, CATHERINE
Address: 10165 NW 31ST COURT
City-St-Zip: SUNRISE, FL 33351

Title: MGR (X) Delete
Name: FORTURA, ANTONIA TONI
Address: 1307 BRENTWOOD HILLS BLVD.
City-St-Zip: BRANDON, FL 33511

Title: MGR () Delete
Name: FEBRE, ALBERT
Address: 10165 NW 31ST COURT
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL TACIC

MGR

06/30/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date