

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L82031

FILED
Mar 24, 2004
Secretary of State

Entity Name: CPN ELECTRONICS, INC.

Current Principal Place of Business:

4503 NW 103 AVE.
SUITE 200
SUNRISE, FL 33351 US

New Principal Place of Business:

4880 N HIATUS RD
SUNRISE, FL 33351 US

Current Mailing Address:

4503 NW 103 AVE.
SUITE 200
SUNRISE, FL 33351 US

New Mailing Address:

4880 N. HIATUS RD
SUNRISE, FL 33351 US

FEI Number: 13-3588061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGAL INFORMATION SERVICES INC.
1290 WESTON RD.
SUITE 300
FT. LAUDERDALE, FL 33326 US

Name and Address of New Registered Agent:

LEGAL INFORMATION SERVICES INC.
2500 WESTON ROAD
SUITE 404
WESTON, FL 33331 US

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:

03/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ZARRELLA, KALEROI,
Address: 10216 NW 47TH STREET
City-St-Zip: SUNRISE, FL

Title: VSD () Delete
Name: SHAW, DENISE,
Address: 10216 NW 47TH STREET
City-St-Zip: SUNRISE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ZARRELLA, KALEROI,
Address: 10216 NW 47TH STREET
City-St-Zip: SUNRISE, FL 33325

Title: VSD (X) Change () Addition
Name: SHAW, DENISE,
Address: 10216 NW 47TH STREET
City-St-Zip: SUNRISE, FL 33325

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.

SIGNATURE: KALEROI ZARRELLA

PTD

03/24/2004

Electronic Signature of Signing Officer or Director

Date