2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 1

Secretary of State DOCUMENT # M09019 02-20-2006 90031 019 ***150.00 1. Entity Name MULLEN ELECTRIC, INC. Principal Place of Business Mailing Address 216 EMERALD DR N 216 EMERALD DR N 60018858 INDIAN HARBOUR BEACH, FL 32937 INDIAN HARBOUR BEACH, FL 32937 2. Principal Place of Business 3. Mailing Address PLACE 1177 CARISSA 1177 CARISSA PLACE Suite, Apt. #, etc. Suite, Apt. #, etc. 01062006 Chg-P CR2E034 (11/05) City & State City & State Applied For 4. FEI Number MÉLBOURNE MELBOURNE 59-2494890 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired U5A 32435 32935 U5 A 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HARRY J. PINGSTON, JR PINGSTON JR., HARRY J Street Address (P.O. Box Number is Not Acceptable) 216 EMERALD DRIVE NORTH INDIAN HARBOUR BEACH, FL 32937 CITYMELBOURNE 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. HARM J. PINESTON, JR. PRESIDENT 020406 SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MULLEN; SCOTT P NAME NAME STREET ADDRESS 216 EMERALD DRIVE NORTH STREET ADDRESS CITY-ST-7IP INDIAN HARBOUR BEACH, FL. 32937 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition PINGSTON JR., HARRY J NAME NAME STREET ADDRESS 216 EMERALD DRIVE NORTH STREET ADDRESS INDIAN HARBOUR BEACH, FL 32937 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TIDE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 in changed, or on an attachypent with an address, with all other like empowered.

PINGSTON JC

FILED

Feb 20, 2006 8:00 am

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