2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M45742

Entity Name: POMPANO MOTOR COMPANY

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

855 S. FEDERAL HWY 855 S. FEDERAL HWY

POMPANO BEACH, FL 33062 POMPANO BEACH, FL 33062 US

Current Mailing Address: New Mailing Address:

855 S. FEDERAL HWY 855 S. FEDERAL HWY

POMPANO BEACH, FL 33062 POMPANO BEACH, FL 33062 US

FEI Number: 59-2771699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ACCARDI, EDMUND 855 S. FEDERAL HWY

POMPANO BEACH, FL 33062 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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PSTD (X) Change () Addition

 Name:
 ACCARDI, EDMUND,
 Name:
 ACCARDI, EDMUND

 Address:
 855 S. FEDERAL HWY
 Address:
 855 S. FEDERAL HWY

City-St-Zip: POMPANO BEACH, FL City-St-Zip: POMPANO BEACH, FL 33062 US

Title: VS (X) Delete Title: () Change () Addition

 Name:
 ACCARDI JOSEPH,
 Name:

 Address:
 855 S. FEDERAL HWY
 Address:

 City-St-Zip:
 POMPANO BEACH, FL
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

| MIROT, STEVE | Name:
| Address: 855 S FEDERAL HWY | Address:
| City-St-Zip: | POMPANO BEACH, FL 33062 | City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: EDMUND ACCARDI PSTD 01/03/2007