## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000081005

Entity Name: EN TECHNOLOGIES CORPORATION

FILED Apr 18, 2007 Secretary of State

Entity Name: EN TECHNOLOGIES CORPORATION							
Current Pr	incipal Place	of Business:	New Prin	New Principal Place of Business:			
SUITE 280	REMO AVE ABLES, FL 331	146					
Current Ma	ailing Addres	s:	New Mail	New Mailing Address:			
SUITE 280	REMO AVE. ABLES, FL 331	146					
FEI Number:	65-1038796	FEI Number Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Des	sired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	D, SALVATORI 148TH STREE 33158 US		1500 SAN SUITE 28	FILIPPUCCI, JAMES M CFO 1500 SAN REMO AVE. SUITE 280 CORAL GABLES, FL 33146 US			
The above in the State		submits this statement for the p	urpose of changing	its registered	office or registered age	nt, or both,	
SIGNATUR	RE: JAMES M			04/18/2007			
Election Carr		ic Signature of Registered Age Trust Fund Contribution ( ).	nt		Date		
OFFICERS	AND DIREC	rors:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	COO () GOODWIN, TEF 359 SW 159TH PEMBROKE PIN	TERRACE	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	, ,		Title: Name: Address: City-St-Zip:	WHITE, ANTO	(X) Change()Addition DNY MR. EMO AVE. #280 LES, FL 331463041 US		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	FILIPPUCCI, 1500 SAN RE	( ) Change (X) Addition JAMES M MR. EMO AVE. # 280 LES, FL 331463041 US		

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: JAMES M. FILIPPUCCI CFO 04/18/2007