

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023233

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: HYDROPOWER EQUIPMENT, INC.

## Current Principal Place of Business:

8604 NW 70 ST.  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

8604 NW 70 ST.  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 65-1083716

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOLINA, ELIDA  
7971 NW 56TH STREET  
MIAMI, FL 33166 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CRUZ, EDUARDO  
Address: 555 NW 100 CT  
City-St-Zip: MIAMI, FL 33172

Title: T ( ) Delete  
Name: MOLINA, ELIDA  
Address: 555 NW 100 CT.  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete  
Name: CRUZ, MATIAS  
Address: 555 NW 100 CT.  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: CRUZ, MATIAS  
Address: 19420 SW 129 AVE  
City-St-Zip: MIAMI, FL 33177

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: EDUARDO CRUZ

PD

04/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date