2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033958

FILED Feb 28, 2007 Secretary of State

Entity Name: PLUGINZ INC. **Current Principal Place of Business: New Principal Place of Business:** 228 HAMILTON AVENUE 3RD FLOOR PALO ALTO, CA 94301 **Current Mailing Address: New Mailing Address:** 228 HAMILTON AVENUE 3RD FLOOR PALO ALTO, CA 94301 FEI Number: 65-1088917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JACOBS & CARNEY GILCHER, CHRISTOPHER 16512 FOOTHILL DRIVE 6401 SW 87 AVENUE TAMPA, FL 33624 204 MIAMI, FL 33173 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: CHRISTOPHER GILCHER 02/28/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: (X) Change () Addition Name: MOSS, KEN Name: LOTT, ROBERT 228 HAMILTON AVENUE, 3RD FLOOR 228 HAMILTON AVENUE, 3RD FLOOR Address: Address: City-St-Zip: PALO ALTO, CA 94301 City-St-Zip: PALO ALTO, CA 94301 Title: () Delete Title: () Change (X) Addition GILCHER, CHRISTOPHER Name: Name: 228 HAMILTON AVENUE, 3RD FLOOR Address: Address: City-St-Zip: City-St-Zip: PALO ALTO, CA Title: () Change (X) Addition () Delete Title: Name: PIERCY, CHRISTOPHER Name: 228 HAMILTON AVENUE, 3RD FLOOR Address Address: City-St-Zip: City-St-Zip: PALO ALTO, CA

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: ROBERT LOTT PD 02/28/2007