

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000106745

Entity Name: VHPOWER, INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

105 HUNTING TOWER DR.
GROVETOWN, GA 30813

New Principal Place of Business:

9000 NEW ORLEANS CT
ORLANDO, FL 32818

Current Mailing Address:

105 HUNTING TOWER DR.
GROVETOWN, GA 30813

New Mailing Address:

9000 NEW ORLEANS CT.
ORLANDO, FL 32818

FEI Number: 59-3754998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERS, ASA R
9000 NEW ORLEANS CT.
ORLANDO, FL 32818 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: MD () Delete
Name: ROSELLINI, STEFANO MR.
Address: 105 HUNTING TOWER DR.
City-St-Zip: GROVETOWN, GA 30813 US

Title: PD () Delete
Name: ASA, WATERS R MR.
Address: 9000 NEW ORLEANS CT.
City-St-Zip: ORLANDO, FL 32818 US

Title: D () Delete
Name: PERRY, KLEYLE J MR.
Address: 412 COMMERCE POINT
City-St-Zip: NEW ORLEANS, LA 70123

Title: ST () Delete
Name: TERESA, LO PASSO MS.
Address: 105 HUNTING TOWER DR.
City-St-Zip: GROVETOWN, GA 30813 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ASA WATERS

PRES

04/18/2005

Electronic Signature of Signing Officer or Director

Date