2005 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 08, 2005 8:00 am Secretary of State 09-08-2005 90069 032 ***550.00 DOCUMENT # P02000003343 1. Entity Name FLORIDA ENERGY, INC. Principal Place of Business Mailing Address 50065619 101 NE JETTIE TERRACE 101 NE JETTIE TERRACE PORT ST LUCIE, FL 34983 PORT ST LUCIE, FL 34983 CR2E034 (10/03) 07012005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0565031 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BRUNER, STEPHEN E 101 NE JETTIE TERRACE PORT ST LUCIE, FL 34983 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. TITLE NAME BRUNER, STEPHEN E STREET ADDRESS 101 NE JETTIE TERRACE CITY-ST-ZIP PORT ST LUCIE, FL 34983 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if ment with an address, with all other like empowered. changed, or on an attach

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

9-06-05

FILED