

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035665

Entity Name: LION POWER, CORPORATION

FILED
Jul 19, 2007
Secretary of State

Current Principal Place of Business:

1761 SE 18 TERRACE
HOMESTEAD, FL 33035

New Principal Place of Business:

1761 SE 18 TE
HOMESTEAD, FL 33035

Current Mailing Address:

1761 SE 18 TERRACE
HOMESTEAD, FL 33035

New Mailing Address:

1761 SE 18 TE
HOMESTEAD, FL 33035

FEI Number: 77-0587806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, CASONNIE
1761 SE 18 TERRACE
HOMESTEAD, FL 33035 US

Name and Address of New Registered Agent:

LEON, CASONNIE
1761 SE 18 TE
HOMESTEAD, FL 33035 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: CASONNIE LEON

07/19/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LEON, JULIO A
Address: 1761 SE 18 TERRACE
City-St-Zip: HOMESTEAD, FL 33035

Title: P () Delete
Name: LEON, CASONNIE
Address: 1761 SE 18 TERRACE
City-St-Zip: HOMESTEAD, FL 33035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEON, CASONNIE
Address: 1761 SE 18 TE
City-St-Zip: HOMESTEAD, FL 33035

Title: VP (X) Change () Addition
Name: LEON, JULIO
Address: 1761 SE 18 TE
City-St-Zip: HOMESTEAD, FL 33035

I hereby certify that the information supplied with this filing does not qualify 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: CASONNIE LEON

P

07/19/2007

Electronic Signature of Signing Officer or Director

Date