## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 05, 2004 08:00 AN Secretary of State

DOCUMENT # P02000101409  1. Entity Name ALL POWER TECHNOLOGIES, INC.						. · · ·	
Principal Plac 9 CARDINAL LONGWOOD,	DRIVE	Mailing Address 9 CARDINAL DRIVE LONGWOOD, FL 32779					
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DO NOT WRITE IN THIS SPA			CE	01092004 4. FEI Numb 45-048		CR2E034 (10/03)  Applied For  Not Applicable	
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			orts of the state of	5. Certificate of Status Desired See Required Fee Required			
6. Name and Address of Current Registered Agent LIGGETT, CLARE 9 CARDINAL DRIVE LONGWOOD, FL 32779				DO NOT WRITE 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  Exprasure lyped or printed name of foodered agent and talls if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	<u>, yaoggo</u>	102778	
10. TITLE NAME STREET ADDRESS CUTY-ST-ZIP	OFFICERS AND DI PSTD LIGGETT, CLARE 9 CARDINAL DRIVE LONGWOOD, FL 32779	RECTORS			<del>' 04/05/04-</del> 1	58050-003 150.00 °	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SF	PACE	
title Name Street address City -ST-Zip	*						
nitle name street address city-st-zip	<u> </u>						
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 changed, or on an attachment with an address, with alt other like empowered.							