2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104221

FILED Apr 26, 2007 Secretary of State

Entity Name: MATRIX INDUSTRIAL TECHNOLOGY & ELECTRONIC SUPPLY, INC.

Current Principal Place of Business: New Principal Place of Business:

897 SW 159 WAY

PEMBROKE PINES, FL 33027

Current Mailing Address: New Mailing Address:

C/O SOUTH BROWARD ACCOUNTING % SOUTH BROWARD ACCTNG SVCS 1152 N UNIVERSITY DR STE 202 5599 S UNIVERSITY DRIVE ~ STE 306

PEMBROKE PINES, FL 33024 DAVIE, FL 33328

FEI Number: 06-1649056 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHEDIAK, MIRTA CHEDIAK, MIRTA

1152 N UNIVERSITY DR, STE 202 5599 S UNIVERSITY DRIVE ~ STE 306

PEMBROKE PINES, FL 33024 US DAVIE, FL 33328 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: MIRTA CHEDIAK 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: PVST (X) Change () Addition

 Name:
 BUTARDO, JOSEPH
 Name:
 BUTARDO, JOSEPH

 Address:
 897 S W 159 WAY
 Address:
 897 SW 159 WAY

City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33027

Title: PVST () Delete Title: () Change () Addition

 Name:
 GRILLO, JEAN
 Name:

 Address:
 897 SW 159 WAY
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33027
 City-St-Zip:

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: JOSEPH BUTARDO P 04/26/2007