2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2008
Secretary of State

DOCUMENT# P03000061033

Entity Name: ADVANCED POWER PRODUCTS, INC.

Current Principal Place of Business:

260 CRANDON BLVD.
SUITE 32, PMB#202
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

260 CRANDON BLVD.
SUITE 32, PMB#202
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 56-2370054 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DELGADO, PEDRO P CPA
1320 SOUTH DIXIE HIGHWAY
SUITE 700
CORAL GABLES, FL 33146 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: P ( ) Delete
Name: SCIPIONI, FRANCESCO
Address: 14 TURTLE WALK
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP ( ) Delete
Name: LESSIG, WAYNE A
Address: 6145 POLO CLUB DRIVE
City-St-Zip: CUMMING, GA 30040

Title: T ( ) Delete
Name: SCIPIONI, SUSAN L
Address: 14 TURTLE WALK
City-St-Zip: KEY BISCAYNE, FL 33149

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:

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: SUSAN L. SCIPIONI T 05/20/2008

Electronic Signature of Signing Officer or Director — Date