2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059833

Entity Name: GUERILLA TECHNOLOGIES, INC.

1841 SW MICHAELANGELO AVE.

PORT ST. LUCIE, FL 34953

Address:

City-St-Zip:

FILED Apr 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5029 SE HORSESHOE PT ROAD 4203 SW HIGH MEADOWS AVE STUART, FL 34997 PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 5029 SE HORSESHOE PT ROAD 4203 SW HIGH MEADOWS AVE STUART, FL 34997 PALM CITY, FL 34990 FEI Number: 48-1275482 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: PARROTT, ROBERT A IV 5029 SE HORSESHOE PT ROAD STUART, FL 34997 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete () Change () Addition PARROTT, CAMILLE M Name: Name: 5029 SE HORSESHOE PT ROAD Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: Title: () Delete () Change () Addition Name: PARROTT, ROBERT A IV Name: 5029 SE HORSESHOE PT ROAD Address: Address: STUART, FL 34997 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: () Delete GREINER, RICHARD Name: GREINER, RICHARD Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT A PARROTT IV P 04/04/2008

4203 SW HIGH MEADOWS AVE

PALM CITY, FL 34990