2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063834

Entity Name: POWER MANAGEMENT INTERNATIONAL, INC.

FILED Jul 31, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
3001 N. RC SUITE 200 TAMPA, FL	CKY POINT . 33607	DR				
Current Mailing Address:			New Maili	New Mailing Address:		
3001 N. RC SUITE 200 TAMPA, FL	CKY POINT 33607	DR				
FEI Number:	20-3581447	FEI Number Applied For () FEI Nu	ımber Not Appl	cable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
SUITE 200	'INSTON OCKY POINT 33607 US	DR	WALLIS, WINSTON D 4324 SPINAKER COVE LN TAMPA, FL 33615 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: WINSTON D. WALLIS				07/31/2006		
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		• ,	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WALLIS, WIN	KY POINT DR, SUITE 200	Title: Name: Address: City-St-Zip:	P (X) C WALLIS, WINSTO 4324 SPINAKER TAMPA, FL 3361	COVE LN	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	V () C PORE, MIKE 7452 SURREY PI APOLLO BEACH,		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () C GARCIA, CARLO CIRCUITO DIPLO NAUCALPAN, MX	DMATICO #32	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	CARRILLO FALC AVENIDA DE LA I	Change (X) Addition ON, JOSE FERNANDO HACIENDA #22 .RAGOZA,, MX 52959 MX	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D ()C ALAVEZ, ALEJAN REFORMA 350 P MEXICO, DF 066	P-11	

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: WINSTON D. WALLIS P 07/31/2006