2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000074651

Entity Name: BULLETPROOF ELECTRONICS, INC

FILED Mar 18, 2008 Secretary of State

Entity Name: BULLETPROOF ELECTRONICS, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
417-12TH ST. W, SUITE 209 BRADENTON, FL 34205				715-6TH AVE WEST BRADENTON, FL 34205		
Current Mailing Address:				New Mailing Address:		
715 6TH AVE WEST BRADENTON, FL 34205				715-6TH AVE WEST BRADENTON, FL 34205		
FEI Number:	20-1110417	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MAPES, REED 417-12TH ST W STE 209 BRADENTON, FL 34205 US				MAPES, REED 715-6TH AVE WEST BRADENTON, FL 34205 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:				03/18/2008		
Electronic Signature of Registered Agent				Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ()ERAMIREZ, NICK 7007 SPINNAKE ENGLEWOOD, F			Title: Name: Address: City-St-Zip:	VP (X RAMIREZ, NIC 7006 SPINNAI ENGLEWOOD	KER BLVD
Title: Name: Address: City-St-Zip:	S ()E MAPES, REED V 318 BAY DR S 7 BRADENTON BE			Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:]()	Delete		Title: Name: Address: City-St-Zip:	P (BADER, CHAF 715-6TH AVE BRADENTON,	WEST

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: REED W MAPES S 03/18/2008