

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127765

Entity Name: AED TECHNOLOGIES, INC

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

4801 LINTON BLVD
SUITE 472
DELRAY BEACH, FL 33445 US

Current Mailing Address:

4801 LINTON BLVD
SUITE 472
DELRAY BEACH, FL 33445 US

FEI Number: 20-1595997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUSENS, BRUCE
16422 NE 34 AVENUE
NORTH MIAMI BEACH, FL 33160 US

New Principal Place of Business:

1814 NE MIAMI GARDENS DRIVE
SUITE 400
NORTH MIAMI BEACH, FL 33179 US

New Mailing Address:

1814 NE MIAMI GARDENS DRIVE
SUITE 400
NORTH MIAMI BEACH, FL 33179 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: KUSENS, BRUCE
Address: 16422 NE 34 AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRUCE KUSENS

PRES

01/05/2005

Electronic Signature of Signing Officer or Director

Date