# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2009**
**Secretary of State**

DOCUMENT# P05000056445

**Entity Name:** MEGA POWER INTERNATIONAL, INC.

**Current Principal Place of Business:**

330 SCARLET BLVD
OLDSMAR, FL 34677 US

**New Principal Place of Business:**

**Current Mailing Address:**

330 SCARLET BLVD
OLDSMAR, FL 34677 US

**New Mailing Address:**

**FEI Number: 20-2687691** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GLASER, DAVID
330 SCARLET BLVD
OLDSMAR, FL 34677 US

**Name and Address of New Registered Agent:**

PIPER CAPITAL LLC
330 SCARLET BLVD
OLDSMAR, FL 34677 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: DAVID GLASER 04/29/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: GLASER, DAVID
Address: 330 SCARLET BLVD
City-St-Zip: OLDSMAR, FL 34677

Title: VP ( ) Delete
Name: ESTERLINE, OLEN
Address: 330 SCARLET BLVD
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete
Name: TAYLOR, TERRANCE
Address: 3108 CENTRAL DR
City-St-Zip: PLANT CITY, FL 33567

Title: D ( ) Delete
Name: MCGRIFF, ROY
Address: 10692 QUAIL RIDGE DR
City-St-Zip: PONTE VERDE, FL 32081

**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:

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: DAVID GLASER CFO 04/29/2009
Electronic Signature of Signing Officer or Director Date