

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104132

Entity Name: MPOWER SOLUTIONS INC.

FILED
Jul 11, 2006
Secretary of State

Current Principal Place of Business:

2139 SOUTH CRANBROOK AVE.
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

Current Mailing Address:

2139 SOUTH CRANBROOK AVE.
ST. AUGUSTINE, FL 32092

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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

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 AND DIRECTORS:

Title: PD () Delete
Name: RANGINENI, SRIDEVI
Address: 2139 SOUTH CRANBROOK AVE.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: MADAN, MUKOTI
Address: 2139 SOUTH CRANBROOK AVE.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VP () Change (X) Addition
Name: VIVEK, SUDHAKAR
Address: 205 CASA SEVEILLA AVE
City-St-Zip: ST. AUGUSTINE, FL 32092

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: MADAN

VP

07/11/2006

Electronic Signature of Signing Officer or Director

Date