2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127381

Entity Name: ELECTRIC GENERATING SYSTEMS, INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13280 SW 131ST STREET 12080 SW 127TH AVE SUITE 101 STE 150

MIAMI, FL 33186 MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

13280 SW 131ST STREET 12080 SW 127TH AVE SUITE 101 STE 150

MIAMI, FL 33186 MIAMI, FL 33186

FEI Number: 20-3477155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JOHNSON, ROBERT B

1200 BRIKELL AVE
SUITE 700

MIAMUEL 33131 LIS

KUKER, HOWARD ESQ
9200 SOUTH DADELAND BLVD
SUITE 508
MIAMUEL 33156 LIS

MIAMI, FL 33131 US MIAMI, FL 33156 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: HOWARD KUKER 02/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: MARTINO, BRIAN Name: LONEY, SEAN P
Address: 13630 SW 127 COURT Address: 13246 SW 146TH STREET

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: D () Delete Title: D (X) Change () Addition Name: LONEY, SEAN P Name: GARCIA, GILBERTO P

 Name:
 LONET, SEAN P
 Name:
 GARCIA, GILBERTO P

 Address:
 13246 SW 146TH STREET
 Address:
 8201 SW 42ND STREET

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33155

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 POELVOORDE, AARON

 Address:
 Address:
 9601 SW 142 AVE

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33186

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: SEAN PLONEY P 02/19/2009