2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

ANNUAL REPORT **FILED** DOCUMENT # P06000001456 Jul 16, 2008 08:00 AM 1. Entity Name ELY ENGINEERING INC. **Secretary of State** Principal Place of Business Mailing Address 16729 SAPPHIRE SPRINGS 16729 SAPPHIRE SPRINGS WESTON, FL 33331 WESTON, FL 33331 07072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4091676 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent EISLER, MICHAEL J ESQ DO NOT WRITE 1528 WESTON ROAD WESTON, FL ·33326 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, lyoed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!!, FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 OFFICERS AND DIRECTORS 10. DPS TITLE ELY, ROLAND NAME STREET ADDRESS 16729 SAPPHIRE SPRINGS WESTON, FL 33331 CITY-S1-ZIP NAME STREET ADDRESS CITY-ST-ZIP 07/16/08-80003-012 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-S1-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY - \$1 - ZIP 12. I hereby certify that the information supplied with this little does not qualify for the exemptions contained 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 signature shall have the same legal effect as it made under oath; that I am an officer or director accurate and that my signature shall have the same legal effect as it made under oath, that I am an officer or director elecute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if receiver or trustee empowered to ex changed.

FICER OR DIRECTOR