

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000046418

**FILED**  
**Aug 06, 2007**  
**Secretary of State**

Entity Name: FUTURE GENERATIONS TECHNOLOGY, INC.

**Current Principal Place of Business:**17901 N.W. 5TH ST STE #103  
PEMBROKE PINES, FL 33029**New Principal Place of Business:**17901 N.W. 5TH STREET  
SUITE 103  
PEMBROKE PINES, FL 33029**Current Mailing Address:**17901 N.W. 5TH ST STE #103  
PEMBROKE PINES, FL 33029**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**HIDALGO, AUSBERTO B  
17901 N.W. 5TH ST STE #103  
PEMBROKE PINES, FL 33029     US**Name and Address of New Registered Agent:**WARE, JONATHAN S  
17901 N.W. 5TH STREET  
SUITE 103  
PEMBROKE PINES, FL 33029     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: JONATHAN S. WARE, MD

08/06/2007

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Electronic Signature of Registered Agent

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Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**Title:                      D                      ( ) Delete  
Name:                      HIDALGO, AUSBERTO B  
Address:                      17901 N.W. 5TH ST STE #103  
City-St-Zip:                      PEMBROKE PINES, FL 33029

Title:                      ( ) Delete

Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title:                      DP                      (X) Change ( ) Addition  
Name:                      WARE, JONATHAN S  
Address:                      17901 N.W. 5TH ST STE #103  
City-St-Zip:                      PEMBROKE PINES, FL 33029

Title:                      DV                      ( ) Change (X) Addition

Name:                      HIDALGO, AUSBERTO B  
Address:                      17901 NW 5TH ST STE #103  
City-St-Zip:                      PEMBROKE PINES, FL 33029

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: JONATHAN S. WARE, MD

DP

08/06/2007

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Electronic Signature of Signing Officer or Director

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Date