2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142004

Entity Name: PENTAGON DEFENSE PRODUCTS INC

FILED Aug 07, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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803 HERITAGE DR. 1800 NW 122 TERRACE WESTON, FL 33326 PEMBROKE PINES, FL 33026

Current Mailing Address: New Mailing Address:

803 HERITAGE DR. 1800 N W 122 TERRACE WESTON, FL 33326 PEMBROKE PINES, FL 33026

FEI Number: 20-5881067 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:

GELBART, IRVING
803 HERITAGE DR.
WESTON, FL 33326 US
GELBART, IRVING
1800 NW 122 TERRACE
PEMBROKE PINES, FL 33026 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: 08/07/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GELBART, IRVING GELBART, IRVING Name: Name: 803 HERITAGE DR. 1800 NW 122 TERRACE Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: PEMBROKE PINES, FL 33026

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

Name:GELBART, CARMELLAName:GELBART, CARMELLAAddress:803 HERITAGE DR.Address:1800 NW 122 TERRACECity-St-Zip:WESTON, FL 33326City-St-Zip:PEMBROKE PINES, FL 33026

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: IRVING GELBART PD 08/07/2007