2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000059446

Entity Name: MORE POWER, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9051 AKEXANDRA CIR 9051 ALEXANDRA CIRCLE WELLINGTON, FL 334146439 WELLINGTON, FL 334146439

Current Mailing Address: New Mailing Address:

9051 AKEXANDRA CIR 9051 ALEXANDRA CIRCLE WELLINGTON, FL 334146439 WELLINGTON, FL 334146439

FEI Number: 26-0195588 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:

MOREJON, JORGE L
9051 AKEXANDRA CIR
WELLINGTON, FL 334146439 US
MOREJON, JORGE L
9051 ALEXANDRA CIRCLE
WELLINGTON, FL 334146439 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: 04/28/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOREJON, JORGE
Address: 9051 AKEYANDRA CIR

Address: 9051 AKEXANDRA CIR City-St-Zip: WELLINGTON, FL 334146439

 Title:
 STD
 () Delete

 Name:
 MOREJON, BEATRIZ

 Address:
 9051 AKEXANDRA CIR

 City-St-Zip:
 WELLINGTON, FL 334146439

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

 Name:
 MOREJON, JORGE L

 Address:
 9051 ALEXANDRA CIRCLE

 City-St-Zip:
 WELLINGTON, FL 334146439

Title: STD (X) Change () Addition

 Name:
 MOREJON, BEATRIZ

 Address:
 9051 ALEXANDRA CIRCLE

 City-St-Zip:
 WELLINGTON, FL 334146439

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: JORGE L MOREJON PD 04/28/2008