2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000130904

Entity Name: ADVANCED BLAST PROTECTION, INC.

FILED May 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1600 NORTH PARK DRIVE WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 1600 NORTH PARK DRIVE WESTON, FL 33326 FEI Number: 64-0955275 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MYATT, JASON QUARANTA, JOHN M 11900 BISCAYNE BLVD., SUITE 700 1600 NORTH PARK DRIVE MIAMI, FL 33181 US WESTON, FL 33326 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: JOHN M. QUARANTA 05/07/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: MYATT, JASON Name: MYATT, JASON 11900 BISCAYNE BLVD., SUITE 700 1600 NORTH PARK DRIVE Address: Address: MIAMI, FL 33181 WESTON, FL 33326 City-St-Zip: City-St-Zip: () Delete Title: CEOD () Change (X) Addition Title: Name: Name: PHILLIPS, WARREN R 1600 NORTH PARK DRIVE Address: Address: WESTON, FL 33326 City-St-Zip: City-St-Zip: Title: () Change (X) Addition Title: () Delete CFOT BARESEL, ROGER P Name: Name: 1600 NORTH PARK DRIVE Address Address: City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: () Delete Title: S GC () Change (X) Addition QUARANTA, JOHN M Name: Name: Address: Address: 1600 NORTH PARK DRIVE City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: Title: () Change (X) Addition () Delete Name: Name: MILLER, MARTIN Address: Address: 11900 BISCAYNE BLVD., SUITE 700 City-St-Zip: City-St-Zip: MIAMI, FL 33181

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: JASON MYATT P 05/07/2008