FILED

2002 UNIFORM BUSINESS REPORT (UBR)

	**************************************	Mar 19, 2002 8:00 am Secretary of State						
FLO-POW	✓		03-19-2002 90034 019 ***150.00					
•	ce of Business OINCIANA WAY STE 316 FL 33480	AY STE 316		1 28811883 UK 18188 HUA KUM SEUN SEUN SEUN	Lânn Gang wan (221) bible ânt 1881			
2. Principal P	natis ST.							
	Suite, Apt. #, etc. Suite 200 Suite 200 Suite 200				DO NOT WRITE IN THIS SPACE			
City & Stat	re	City & State			4. FEI Number 65-0431953 Applied For Not Applicable			
Zip	Palm Beach, FL Country	West Palm BEach FL Country			5. Certificate of Status Desired S8.75 Additional Fee Required			
- 33401	6. Name and Address of Current Re	33401 gistered Agent			7. Name and Address of New Registe			
			Name Same					
ARMANDO 340 POIN SUITE 316	Offe	Andre H. Clembris Set Acceptable)						
PALM BEA	ACH FL 33480		Wes	West Palm Beach				
SIGNATURE	s named entity submits this statement for the signature, typed or printed name of registered agent and prattion is eligible to satisfy its Intangible requirement and elects to do so.	title if applicable. (NOTE	: Registered Agent sign	ature required wh	nen reinstating) D. 10. Election Campaign Financing	, _ +		
	ria on back)	Make Check Payab			Trust Fund Contribution.	☐ Added to Fees		
TITLE	OFFICERS AND DI		12.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 11 √ Change		
NAME STREET ADDRESS CITY-ST-ZIP	CARSON, DONALD W 340 ROYAL POINCIANA WAY STE PALM BEACH FL 33480	₹ Delete	NAME STREET ADDRESS CITY-ST-ZIP	One No	n, Donald W			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CEPERO, GUSTAVO R 340 ROYAL POINCIANA WAY STE : PALM BCH FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Cepero One No	West Palm Beach, FL 33401 ☐ Change ☐ Addi V X Cepero, Gustavo R One North Clematis St.,Ste 200				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERNANDEZ, OSCAR R 340 ROYAL POINCIANA WAY STE PALM BEACH FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Herna One N	Palm Beach, FL 33401 ndez, Oscar R orth Clematis St., St	□ Change □ Addition e 200		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BLOMQVIST, ERIK J 340 ROYAL POINCIANA WAY STE : PALM BEACH FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Blomq One No	Palm Beach, FL 33401 wist, ERik J orth Clematis St., St	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS TABERNILLA, ARMANDO A 340 ROYAL POINCIANA WAY, STE PALM BEACH FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS Taber	Palm Beach, FL 33401 nilla, Armando A orth Clematis St., ST	□ Change □ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	West 1	Palm Beach, FL 33401	☐ Change ☐ Addition		
indicated	certify that the information supplied with the on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with preaddress, with	ie and accurate and that m	w eignatura chall	have the ear	na lagal offact as if made under eath: th	at Lam an officer or director		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

56 date 655-6303 Daytime Phone #

2002	unii	FORM BUSII	NESS REPO	RT	(UBR	R)					
DOCUMENT # P9300002746 Entity Name FLO-POWER CORP							425382				
Principal Place of Business 340 ROYAL POINCIANA WAY STE 316 PALM BEACH FL 33480			Mailing Address 340 ROYAL POINCIANA WAY STE 316 PALM BEACH FL 33480						. 41018 4111 (84)		
2. Principal Place of Business			3. Mailing Address ·								
Suite, Apt. #, etc.			Suite, Apt, #, etc.				DO NOT WRITE IN THIS SPACE				
City & State	е		City & State		4. F	-El Number 65-0431953		pplied For lot Applicable			
Zip		Country	Zip	Coun	try	5. (Certificate of Status Desired	\$8.75 Ac			
	6. Name	and Address of Current Re	gistered Agent		Name	7. N	Name and Address of New Registere				
ARMANDO A. TABERNILLA 340 POINCIANA WAY SUITE 316 PALM BEACH FL 33480					Street Address (P.O. Box Number is Not Acceptable) City Zip Code						
SIGNATURE _ 9. This corpo Tax filing r	Signature, typed	or printed name of registered agent and ible to satisfy its Intangible and elects to do so.	FILE NOW! After May 1, 200 Make Check Payab	Registero	d Agent signatur	e required when ro	10. Election Campaign Financing Trust Fund Contribution.	\$5.0 Adde	00 May Be		
1.	DP	OFFICERS AND DI	RECTORS Delete	12.	E I	AD	DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR Change	RS IN 11		
IAAIE TREET ADDRESS IITY-ST-ZIP	CARSON, 340 ROYA	DONALD W AL POINCIANA WAY STE ACH FL 33480		NAM STRE							
ITLE IAME ITREET ADORESS ITY-ST-ZIP	340 ROYA	Gustavo r Al Poinciana way ste H FL 33480	☐ Delate 316	¥	l l	:		☐ Change	Addition		
ITLE IAME TREET ADDRESS ITY-ST-ZIP	340 ROYA	DEZ, OSCAR R IL POINCIANA WAY STE ACH FL 33480	☐ Delcte	ï	1			Change	☐ Addition		
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	340 ROYA	ST, ERIK J AL POINCIANA WAY STE ACH FL 33480	☐ Delete	Ti .	1			Change	☐ Addition		
ITLE IAME ITREET ADORESS ITY+ST+ZIP	340 ROYA	LA, ARMANDO A L POINCIANA WAY, STE ACH FL 33480	☐ Delete	n	i			☐ Change	☐ Addition		
ITLE IAME ITREET ADDRESS INTY-ST-ZIP			□ Delete	Ħ	1			☐ Change	Addition		

13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 11 or Block 12 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayrese Phone #