2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P9400000753 02-24-2006 90012 004 ***150.00 1. Entity Name SCORPION ELECTRIC, INC. Principal Place of Business Mailing Address 1007, 22044 CONCHA AVE 22044 CONCHA AVE BOCA RATON, FL 33428 HS BOCA RATON, FL 33428 US 2. Principal Place of Business 3. Mailing Address 128 BOYD RD 2298 NW 2nd AVE. Suite, Apt. #, etc. Suite, Apt. #, etc. 02102006 CR2E034 (11/05) STE 20 City & State 4. FEI Number Applied For City & State RED ROCK. BOCA RATON, FL65-0454998 Not Applicable ^{Zip}78662 Country Country \$8.75 Additional 33431 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RONALD G WOODS WOODS, RONALD G Street Address (P.O. Box Number is Not Acceptable) C/O-COMPUKEEPER-TNC 22044.CONCHA AVE BOCA RATON, FL 33428 2298 NW 2nd AVE STE 20 City Zip Code BOCA RATON 33431 8. 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. I am familiar with, and accept the obligations of registered age RONALD WOODS, PR 2/10/06 ire, typed or printed name of registered agent and title if appli 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change ■ Addition WOODS, RONALD G NAME NAME WOODS, RONALD G 22044 CONCHA AVE STREET ADDRESS STREET ADDRESS REB ROCK RD 78662 CITY-ST-ZIP BOCA RATON, FL CITY-ST-ZIP Change Addition TITLE □ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY+ST-7IP TITLE Delete TITLE ☐ Change . Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

RONALD WOODS,

FILED

Feb 24, 2006 8:00 am