2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P95000017533

Entity Name: ABSOLUTE POWER & TECHNOLOGIES, INC.

Current Principal Place of Business:

4053 ILEX CIRCLE N
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

14555 NW 260 TH STREET
OKEECHOBEE, FL 34972 US

Current Mailing Address:

4053 ILEX CIRCLE N
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

14555 NW 260 TH STREET
OKEECHOBEE, FL 34972 US

FEI Number: 65-0574287 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAC ALLISTER, JILL R.
4053 ILEX CIRCLE NORTH
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

MAC ALLISTER, JILL R.
14555 NW 260 TH STREET
OKEECHOBEE, FL 34972 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: 04/29/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: MAC ALLISTER, JILL R
Address: 4053 ILEX CIRCLE N
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VPS ( ) Delete
Name: MACALLISTER, TED D
Address: 4053 ILEX CIR NO
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: MAC ALLISTER, JILL R
Address: 14555 NW 260 TH STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: VPS (X) Change ( ) Addition
Name: MACALLISTER, TED D
Address: 14555 NW 260 TH STREET
City-St-Zip: OKEECHOBEE, FL 34972

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: JILL R. MACALLISTER PRES 04/29/2009
Electronic Signature of Signing Officer or Director — Date