

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000093105

Entity Name: MEGA TECHNOLOGIES, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

1600 SARNO RD.
SUITE 21
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

3960 TURKEY POINT DRIVE
MELBOURNE, FL 32934

New Mailing Address:

FEI Number: 59-3411875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADY, DONALD R
3960 TURKEY POINT DRIVE
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRADY, DONALD R
Address: 3960 TURKEY POINT DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: ST () Delete
Name: BRADY, BLEND L
Address: 3960 TURKEY POINT DR
City-St-Zip: MELBOURNE, FL 32934

Title: VP (X) Delete
Name: COREANO, JAIME O
Address: 3551 DOUGLAS PLACE
City-St-Zip: PALM HARBOR, FL 34683

Title: VP () Delete
Name: PFISTER, HENRY
Address: 2813 NE 15TH TERRACE
City-St-Zip: WILTON MANORS, FL 33334

Title: VP () Delete
Name: FLESHMAN, HEIDI
Address: 3325 CORD AVE
City-St-Zip: SAINT CLOUD, FL 34772

Title: P () Delete
Name: NIFAKOS, SPIROS
Address: 2515 RED MAPLE PLACE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BLEND L BRADY

ST

01/13/2009

Electronic Signature of Signing Officer or Director

Date