2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 04, 2008 08:00 AM **DOCUMENT # P98000106175 Secretary of State** 1. Entity Name MULTIPLE-TECH INDUSTRIES, INC. Principal Place of Business Mailing Address 1130 FAIRDALE WAY 1130 FAIRDALE WAY WEST PALM BEACH, FL 33414 WEST PALM BEACH, FL 33414 01292008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0824927 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALVARADO, JUAN I DO NOT WRITE 1130 FAIRDALE WAY WEST PALM BEACH, FL 33414 IN THIS SPACE 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 agent. Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE U00000812596 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 02/12/08-80055-022 150.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ALVARADO, JUAN I NAME STREET ADDRESS 1130 FAIRDALE WAY WEST PALM BEACH, FL 33414 CITY-ST-ZIP TITLE ALVARADO, ROSARIO NAME STREET ADDRESS 1130 FAIRDALE WAY CITY-ST-ZIP WEST PALM BEACH, FL 33414 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this fling 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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-7IP

NAME OF SIGNING OFFICER OR DIRECTOR