2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004515

Entity Name: BATTERIES & BANDS, INC.

FILED Jun 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9466 SO. 670 WEST, UNIT A SANDY, UT 84070 **Current Mailing Address: New Mailing Address:** 9466 SO. 670 WEST, UNIT A SANDY, UT 84070 FEI Number: 87-0649725 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete () Change () Addition WADDOUPS, DOUGLAS C Name: Name: 9466 SO. 670 WEST, UNIT A Address: Address: City-St-Zip: SANDY, UT 84070 City-St-Zip: VD Title: Title: () Delete () Change () Addition Name: FRAGA, ROBERTO D Name: 1233 EAST WILD HAY LN Address: Address: DRAPER, UT 84020 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition FRAGA, H. MARCELO Name: Name: 1227 EAST HICKENLOOPER WAY Address: Address: City-St-Zip: DRAPER, UT 84020 City-St-Zip: Title: () Delete Title: () Change () Addition FRAGA, DANIEL E Name: Name: Address: 1229 EAST WILD HAY LN. Address: City-St-Zip: DRAPER, UT 84020 City-St-Zip: Title: (X) Delete Title: () Change () Addition WALKER, JEFFREY N Name: Name: 9537 SOUTH 700 EAST Address: Address: City-St-Zip: SANDY, UT 84070 City-St-Zip: Title: () Delete Title: CEO (X) Change () Addition ASHTON, BRIAN Name: Name: ASHTON, BRIAN 11111 BANDON DUNES COURT 11111 BANDON DUNES COURT Address: Address: City-St-Zip: LAS VEGAS, NV 89141 City-St-Zip: LAS VEGAS, NV 89141

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS C WADDOUPS PRES 06/02/2006