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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

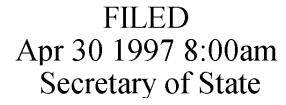
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K60860

(9)

ELECTROSOURCE, INC.





Princ⊦pal Place d	of Business	Mailing Address						
15 S.W. 19TH RO IIAMI FL 33129	<b>D</b> .	415 S.W. 19TH RD. MIAMI FL 33129-1313						
					3. Date Incorporated or Qualified 01/25/1989	1	te of Last F <b>9/1996</b>	Report
. Principal Plac	c of Business	2a. Mailing Address	<del> </del>		4. FEI Number	1		pplied For
		26			65-0107420		N	ot Applicable
Suite, Apt #,	€tc	Suite, Apt. #, etc.			5. Certificate of Status Desired		7	Additional equired
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
] Zip	Country		Cou	ntru	Trust Fund Contribution		<del></del>	to Fees
] ' '	25	29	30	y	8. This corporation has liability for in Florida Statutes		tax under s ] No	3. 199.032,
	9. Name and Address of Co				10. Name and Address of New Reg	gistered A	gent	
BURNS	S, RICHARD			81 Name				
717 PO Suite	ONCE DE LEON BLVD.			82 Street Add	dress (P.O. Box Number is Not Acceptable	le)		
	L GABLES FL 33134			63	· · · · · · · · · · · · · · · · · · ·			
				<b>B4</b> City		FL	<b>65</b> Zip	Code
1. Pursuant to	the provisions of Sections 607	7.0502 and 607.1508, Florida Sta	utes, the at	Dove-named cor	poration submits this statement for the pr		changing i	its registered
office or reg	istered agent, or both, in the l	State of Florida. Such change wa obligations of Section 607 0505	s authorized Florida Stat	d by the corpora	poration submits this statement for the pation's board of directors. I hereby accep	t the appo	ointment as	registered
	the the time accept the	enigotem of, openor of, oppos	i ionaa buu					
GNATURE :	plature. Typed or publica namo of registor	and arount and tallo Lannurahlo // // // // // // // // // // // // //			ired whee republical	DATE		
4.017	1	the figure time in a separation.	UII.: Registered	d Agent signature requ	med when terrstating)	DATE.		
		S AND DIRECTORS	13.	J Agent signature requ	ADDITIONS/CHANGES TO OFFIC		DIRECTO	9S IN 12
<b>≥</b> .							DIRECTOI Change	
2. ILI <b>   </b>	OFFICERS	S AND DIRECTORS	13.	TLE .				
LE E	OFFICERS <b>PSD</b>	S AND DIRECTORS	13. 1.110 1.2 NA	TLE .				
E. ILLE	OFFICERS PSD DI MASE, LUIS	S AND DIRECTORS	13. 1.1 II 1.2 N/ 1.3 ST	TLE				
Z. ILLE IME REEL ADORESS LY-ST-ZIE	OFFICERS PSD DI MASE, LUIS 415 SW 19TH RD.	S AND DIRECTORS	13. 1.1 II 1.2 N/ 1.3 ST	ILE AME REET ADORESS TY-ST-ZIP				Addition
LE ME REELADORESS LY-SE-ZE- LE	OFFICERS PSD DI MASE, LUIS 415 SW 19TH RD.	S AND DIRECTORS DELETE	13. 1.1 TI 1.2 NA 1.3 ST 1.4 CI	TLE  REET ADDRESS TY-ST-ZIP TLE			Change	Additio
LE ME REET ADDRESS LY-ST-ZIE LE ME	OFFICERS PSD DI MASE, LUIS 415 SW 19TH RD.	S AND DIRECTORS DELETE	13. 1.11/ 1.2 N/ 1.3 S1 1.4 Cl 2.1 Tl 2.2 N/	TLE  REET ADDRESS TY-ST-ZIP TLE			Change	Additio
LE L	OFFICERS PSD DI MASE, LUIS 415 SW 19TH RD.	S AND DIRECTORS DELETE	13. 1.1 TU 1.2 N/ 1.3 SI 1.4 CI 2.1 TU 2.2 N/ 2.3 SI	TLE  AME  REET ADORESS  TY-ST-ZIP  TLE  AME			Change	Addition
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PRESENTATION OF SERVICES OF STATE OF SERVICES OF SERVI	OFFICERS PSD DI MASE, LUIS 415 SW 19TH RD. MIAMI FL 33129	S AND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TI 1.2 N/2 1.3 SI 1.4 CI 2.1 TI 2.2 N/2 2.3 SI 2.4 C 3.1 TI 3.2 N/2 3.3 SI 4.4 CI 5.1 TI 5.2 N/2 5.3 SI 6.4 CI 6.3 SI 6.4 CI 6.3 SI 6.4 CI 6.5 SI 6.5 SI 6.6 CI 6.7 TI 6.2 N/2 6.3 SI 6.4 CI 6.5 SI 6.6 CI 6.7 TI 6.2 N/2 6.3 SI 6.4 CI 6.5 SI 6.5 SI 6.4 CI 6.5 SI	TILE  MME  REET ADDRESS  TY-ST-ZIP  TILE  MME  REET ADDRESS  ITY-ST-ZIP  TILE  MME  REET ADDRESS  ITY-ST-ZIP  TILE  AME  REET ADDRESS  TY-ST-ZIP  TILE  AME  REET ADDRESS  TY-ST-ZIP  TILE  AME  REET ADDRESS  TY-ST-ZIP  TILE  MME  REET ADDRESS		ERS AND	Change Change Change Change	Addition Addition Addition Addition

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