

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000043596

1. Entity Name

ENERGY MASTER SYSTEMS, INC.

Principal Place of Business

2540 NORTH 62ND AVENUE  
HOLLYWOOD FL 33024-7

Mailing Address

2540 NORTH 62ND AVENUE  
HOLLYWOOD FL 33024-7

2. Principal Place of Business

15833 111th Ter. N.

Suite, Apt. #, etc.

3. Mailing Address

15833 111th Ter. N.

Suite, Apt. #, etc.

City & State

Jupiter, FL

City & State

Jupiter, FL

Zip

33478

Country

USA

Zip

33478

Country

USA

6. Name and Address of Current Registered Agent

NOVAK, MICHAEL J  
2540 NORTH 62ND AVENUE  
HOLLYWOOD FL 33024-7

4. FEI Number

65-0840440

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME NOVAK, MICHAEL J  
STREET ADDRESS 2540 NORTH 62ND AVENUE  
CITY-ST-ZIP HOLLYWOOD FL 33024-7

TITLE ST ☐ Delete  
NAME NOVAK, MICHAEL J  
STREET ADDRESS 2540 NORTH 62ND AVENUE  
CITY-ST-ZIP HOLLYWOOD FL 33024-7

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME Novak, Michael J  
STREET ADDRESS 15833 111th Ter. N.  
CITY-ST-ZIP Jupiter, FL 33478

TITLE ST ☒ Change ☐ Addition  
NAME Novak Michael J  
STREET ADDRESS 15833 111th Ter. N.  
CITY-ST-ZIP Jupiter, FL 33478

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Apr 25, 2001 8:00 am  
Secretary of State

04-25-2001 90053 020 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)