SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

569945

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ENERGY	SYSTEMS	INTERNATIONAL	INC	ΩE	MIARAIM
LITERIAL	3131603		HIIO.	UE	IVIDATAH

Principal Place of Business Mailing Address				aa.a. diiid diiid 18110 18111 21981 51	is ander Grace Grace Midel Glåll Blålt 1889		
14200 SW 136 STREET Miami Fl 33186	14200 SW 136 STREET MIAMI FL 33186						
				3. Date Incorporated or Qualified 05/18/1978	3a. Date of Last Report 07/24/1995		
Principal Place of Business The Principal Place of Business	2a, Mailing Address 26			4, FEI Number 59-1894592	Applied For Not Applicable		
Suite, Apt #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 25	Ζιρ 29	Countr 30	y 	This corporation has liability for Florida Statutes	Yes 🔀 No		
9. Name and Address of Curre	nt Registered Agent		T Name	10. Name and Address of New Re	gistered Agent		
MEYERSON, ROBERT J		81	Name				
14200 SW 136TH ST		82	Street Add	ddress (P.O. Box Number is Not Acceptable)			
MIAMI, FLOIRDA 33186		83					
		84	City		FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607 050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig SIGNATURE. Signature type of the protection of registered agent. OFFICE 9. A.M.	of Floridal Such change was ations of, Section 607.0505, Fl	authorized by lorida Statutes	rthe corporati	on's board of directors: Thereby accept	the appointment as registered		
12. OFFICERS AN	DELETE	13. 11 TITLE		ADDITIONS/CHANGES TO OFFIC	Change Addition		
NAME MEYERSON, ROBERT J.	beccire	1.2 NAME			Change Addition		
STREET ADDRESS 14200 SW 136 ST.			1 ADDRESS		8		
CITY-ST-ZIP MIAMI FL		1.4 CITY -	1				
TITLE	DELETE	2 1 ToTLE			Change Addition C		
NAME		2.2 NAME					
STREET ADDRESS		23 STREE	1 ADDRESS				
CHY-ST-ZIP	DELETE	2 4 CITY -	ST-ZIP		Chaga Addriga		
TITLE NAME	LJ DELEGIE	3.1 TiTLE 3.2 NAME			Change Addition		
STREET ADDRESS		1	T ADDRESS				
CiTY-SI-ZiP		34 CITY-	1				
TITLE	DELETE	4 1 7:TLE			Change Addition		
. NAME		4 2 NAME					
STREET ADDRESS		4 3 STREE	1 ADDRESS				
CiTy-ST-ZiP		4 4 CITY -	ST - ZiP				
TOTLE	DETELE	5.1 ToTLE			Change Addition		
NAME CIPCET ADDRESS		5.2 NAME	TADDOCCO				
STREET ADDRESS			T ADDRESS				
CHY-ST-ZIP THE	DELETE	5.4 CITY - 6.1 TITLE	21 - 14		Change Addition		
NAME	LI	6.2 NAME	1				
STREET ADDRESS			T ADDRESS				
CITY - ST - ZIP		6 4 CITY -					
14. I do hereby certify that the information supplies	d with this filing is voluntarily for		**********	lify for the exemption stated in Section 1	19.07(3)(k), Florida Statutes 1		

further certify that the information indicated on this annual report or supplemental annual 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 required report is trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Brock 12 or Block 13 if changes if on an attainment with an address

SIGNATURE:

SIGNATURE SIGNATURE AND TYPED AR HILLED MADE OF SIGNING OFFICER ON DIRECTOR

SIGNATURE AND TYPED AR HILLED MADE OF SIGNING OFFICER ON DIRECTOR

- I ARBIOL CITAD CASIO ATTER TREAL BATOL CITA DEBUT GARLE CLOSE GEORGE GEORGE LODE