FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2001 8:00 am Secretary of State DOCUMENT # F95000004737 Entity Name 04-10-2001 90074 002 ***150.00 AQUA HEAT TECHNOLOGY, INC. Principal Place of Business Mailing Address 8030 MAIN ST 8030 MAIN ST 00040 MINNEAPOLIS MN 55432 MINNEAPOLIS MN 55432 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 41-1725023 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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) .FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) Change ☐ Addition TITLE ☐ Delete TITLE RAJAMANNAN, A.H.J. NAME NAME STREET ADDRESS STREET ADDRESS 2120 ARGONNE DR. CITY-ST-ZIP CITY-ST-ZIP MINNEAPOLIS MN 55421 ☐ Addition ☐ Change TITLE TITLE Delete MAYO, CHAPMAN NAME NAME STREET ADDRESS STREET ADDRESS 2243 HILLSIDE AVENUE CITY-ST-ZIP CITY-ST-ZIP ST PAUL MN 55108 ☐ Addition TD TITLE ☐ Change ☐ Delete TITLE BORNT, ALAN NAME NAME STREET ADDRESS STREET ADDRESS 2307 E. HIGHWAY 98 CITY-ST-ZIP CITY-ST-ZIP HOLTVILLE CA 92250 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME BRENNY, VIRGIL NAME STREET ADDRESS 6187 HEATHER CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FRIDLEY MN 55432 TITLE □ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS 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 expoler entail 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 of 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 anatometric with an address, with all other like empowered.

SIGNATURE

Chapman Mayo RINTED NAME OF SIGNING OFFICER OR DIRECTOR 04 April 2001

763 780 4116