

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000000963 (6)

1. Corporation Name
POWER FUELS, INC.

Principal Place of Business

M/S 8200, PO BOX 7
FT WORTH TX 76101-0007

Mailing Address

M/S 3200, PO BOX 7
FT WORTH TX 76101-0007



2. Principal Place of Business	2a. Mailing Address
21 M/S 8200, PO BOX 7	26 M/S 3200, PO BOX 7
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 25	29 30

3. Date Incorporated or Qualified	3a. Date of Last Report
02/26/1996	
4. FEI Number	Applied For
APPLIED FOR	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	
NAME	MESSMAN, JACK L	1.2 NAME	
STREET ADDRESS	801 CHERRY ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT WORTH TX 76102	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	HANLEY, PATRICK D	2.2 NAME	M.B. Smith
STREET ADDRESS	801 CHERRY ST	2.3 STREET ADDRESS	801 Cherry St.
CITY-ST-ZIP	FT WORTH TX 76102	2.4 CITY-ST-ZIP	Ft. Worth, TX 76102
TITLE	DV	3.1 TITLE	
NAME	LASALA, JOSEPH A JR	3.2 NAME	
STREET ADDRESS	801 CHERRY ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT WORTH TX 76102	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	
NAME	NIEMIEC, DONALD W	4.2 NAME	
STREET ADDRESS	801 CHERRY ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT WORTH TX 76102	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	BORER, MARK A	5.2 NAME	500002150565
STREET ADDRESS	801 CHERRY ST	5.3 STREET ADDRESS	-04/22/97--01049--034
CITY-ST-ZIP	FT WORTH TX 76102	5.4 CITY-ST-ZIP	***165.00
TITLE	V	6.1 TITLE	
NAME	GETTIG, PHILIP D	6.2 NAME	
STREET ADDRESS	801 CHERRY ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	FT WORTH TX 76102	6.4 CITY-ST-ZIP	

14. I do 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 4/17/97

CR2E034 (9/96)