

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90232 024 ***150.00

DOCUMENT # F99000002061

1. Entity Name
ASCOM ENERGY SYSTEMS, INC.



Principal Place of Business
**1 PINE LAKES PARKWAY NORTH
PALMCOAST FL 32137**

Mailing Address
**1 PINE LAKES PARKWAY NORTH
PALMCOAST FL 32137**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3575175

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PDCB
MUELLER, BEAT
BELPSTRASSE 37, CH-3000 BERN 14
SWITZERLAND** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Board of Directors
REITER, HANS
25 PINE STREET
ROCKAWAY, NJ 07866** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SDBD
ZIMMERMAN, MARKUS
BELPSTRASSE 37, CH-3000 BERN 14
SWITZERLAND** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DEUTSCH, FELIX
BELPSTRASSE 37, CH-3000 BERN 14
SWITZERLAND** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFO
LIVINGSTON, ROBERT
1 PINE LAKES PKWY N
PALM COAST FL 32137** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
EDWARDS, CHARLES
1 PINE LAKES PKWY N
PALM COAST FL 32137** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
RHONEHOUSE, ROBERT D
1 PINE LAKES PKWY N
PALM COAST FL 32137** ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

~~Attachment~~

799000002061

ascom Energy Systems
70014577

Department Of State
PO Box 1500
TALLAHASSEE FL 32302-1500

Payment advice

Document / Date
2000000142 / 01/23/2003
Our accounting clerk

Telephone

Fax

Your account with us
45491

Dear Sir/Madam,

Please use the check no. 97532 (paym.doc. 2000000142) to clear the items listed below:

Your document	Date	Gross Amount	Deductions	Net Amount
UBR2003	01/20/2003	150.00	0.00	*****150.00*
Sum total		150.00	0.00	*****150.00*

Payment document 2000000142	Date 01/23/2003	Currency USD	Payment amount *****150.00*
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