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

**PROFIT** CORPORATION -ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

### Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # G41115** 1. Corporation Name SOLAR ENERGY SYSTEMS, INC.

# **FILED** Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90013 016 \*\*\*150.00



Principal Place	e of Business	Mailing Address					41411 41411 4141		
% HERBERT J. 7300 SW 112 S MIAMI FL 3315	STREET	% HERBERT J. HOUTKIN 7300 SW 112 STREET MIAMI FL 33156	% HERBERT J. HOUTKIN 7300 SW 112 STREET			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 05/26/1983			
2. Principal Pl	ace of Business	2a. Mailing Address	Mailing Address			4. FEI Number	Α	Applied For	
21		26 7345 NW (	7345 NW 68 WAY			59-2290051		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City_& State		28 PARKLAND,	28 PARKLANY, FL			6. Election Campaign Financing Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cour	ntry	)	8. This corporation owes the current year Ir	tangible	_ \	
24	25	29 55067 3	$o \mid U$	<u> </u>		Personal Property Tax.	∐ Yes	□No	
Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent		
	TWILL LIEDDEDT		1	81	Name				
HOUTKIN, HERBERT J.				82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
7300 SW 112 STREET				٦-	Oll Out / louis	ous (i tot box turibs) is trot reaspease,			
MIAI	MI FL 33156		Ī	83					
•				24	014		85 Zip	o Code	
				84	City	FI	_   65   21	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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
	Signature, typed or printed name of registered agent			Agent	signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECT	CODE IN 12	
12.	PD OFFICERS AND	<del>,,</del>	13.		100	CE PRESIDENT	Change		
TITLE	HOUTKIN, HERBERT J.	☐ DELETE	1.1 TITLE		Z/C		Onlange	7.00.00	
NAME	7300 SW 112 STREET MIAMI FL			1.2 NAME		110-ANN DONATH	$\Rightarrow$	9	
STREET ADDRESS			1.3 STREET ADDRESS 73			45 NW 68 WAY PARKETER			
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NAME			i i		ADDRESS				
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NAME	فيلان				ADDRESS	,			
STREET ADDRESS			5.4 CIT		1				
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NAME		•	1		ADDRESS				
STREET ADDRESS			0.3 311	NEE I A		•			

CITY-ST-ZIP 14. 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 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, with all other like empowered.