## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

K60860

(9)

ELECTROSOURCE, I	NC.
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Principal Place of Business Mailing Address
415 S.W. 19TH RD.
415 S.W. 19TH RD.
MIAMI FL 33129 MIAMI FL 33129



Sults, Apt. #, etc.    Sults, Apt. #, etc.   Sults, Apt. #, etc.   Sults, Apt. #, etc.   S. Conflicate of Status Desind   Se.75 Additional Fee Required   Se.7	MIAMI FL 33129		415 S.W. 19TH RO. Miami Fl 33129					
2.   Name   Aptivide Fixed   Suite						·		
20   Sulle, Apt. #, etc.   S. Certificate for State, Desired   S. F.75 Additional Fee Required 20   S. Certificate for State, Desired   S. F.75 Additional Fee Required 20   S. Total Control   S. Certificate for State, Desired   S. Certificate   S. Certificat		ace of Business	2a. Mailing Address				00,02	
Sc. Carried con Status Desired   St. Carried control Status Desired   St. Carried Compared   St. State   St. Carried Compared Infrancing   St. Oth More Representation   St. St. Oth More Represen	21		<del></del>			65-0107420		
28   29   Country   Zip   Country   Zip   Country   S.5.00 May Se Added to Fees   Added to F	22					5. Certificate of Status Desired		
20   Country   20	City & State		<del></del>			, ,		
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name BURNS, RICHARD 717 PONCE DE LEON BLVD, SUITE 309 CORAL GABLES FI. 33134  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Plonds Statutes, the above-named corporation submits this statement for the purpose of claringing its registered differential with an advanced the objection 607.0502 and 607.1508. Plonds Statutes, the above-named corporation submits this statement for the purpose of claringing its registered differential with an advanced agent, or both, in the State of Florids Statutes. The objective state of the depotency of the support of the su		Country	Zip	Cour	itry	8. This corporation has liability for it		
BURNS, RICHARD 717 PONCE DE LEON BLVD. SUITE 309 CORAL GABLES FL 33134  18. Stroot Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-nembed 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 horeby accept the exportment as registered agent, I am SIGNATURE  SIGNATURE  Signature, layed or primor name of any state or primor name of agents. I am SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. INLE	24		1441	30				0 100.002,
BURNS, RICHARD 717 PONCE DE LEON BLVD. SUITE 309 CORAL GABLES FL 33134  11. Pursuant to the provisions of Sections 697,0502 and 697,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing at registered of foce or registered eigent to both, in the State of Footia, Suin change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INC.  PSD DI MASE, LUIS 117 MME 117 MME 118 MARIE 13129  116 DI MASE, LUIS 117 MME 128 MIAMIR FL 33129  116 DELETE 117 MME 129 MIAMIR FL 33129  116 DELETE 117 MME 129 MIAMIR FL 33129  116 DELETE 117 MME 129 MIAMIR FL 33129  116 Change 120 Addition  Addition  Addition  SIREEL ADDRESS CDTV-S1-7P  ITHE MANE SIREEL ADDRESS CDTV-S1-7P		9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Ro	egistered Agent	
T11 PONCE DE LEON BLVD. SUITE 309 CORAL GABLES FL 33134  11. Pursuant to the provisions of Sections 697,0502 and 607,1508. Florida Statutes, the above named corporation's board of directors. In the State of Florida. Sun change was authorized by the corporation's board of directors. In the state of Florida. Sun change was authorized by the corporation's board of directors. In the state of Florida. Sun change was authorized by the corporation's board of directors. In the state of Florida. Sun change was authorized by the corporation's board of directors. In the state of the purpose of changing its registered office familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signification by the state of Florida. Sun change was authorized by the corporation's board of directors. In the statement for the purpose of changing its registered office familiar with, and accept the dippointment is registered agent. I am statement of the purpose of change in the statement of the corporation's board of directors. In the statement of the purpose of change in the statement of the purpose of the registered office of directors. In the statement of the purpose of the purp				- 1	81 Name			
SURFER ADDRESS OFFICE BY MAME SIREET ADDRESS OFFI ST-2P TITLE    DELETE   D				}	82 Street Δ/do	trace (P.O. Box Number is Not Acceptable	<u>~)</u>	
CORAL GABLES FL 33134  ### City				ľ	Oliveet Add	areas (1.0. box Number is Not Acceptable	θ)	
Section   Companies   Compan				[	83			
T1. Pursuant to the provisions of Sections 607.0502 and 607.1508. Ronda Statutes, the above-named corporation submits this statement for the purpose of changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am registered agent. I am solid the obligations of Section 607.0505. Florida Statutes.  SIGNATURE  Signature. T2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  III.E PSD DI MASE, LUIS  415 SW 19TH RD. 13 SIRECT ADDRESS  OLIV-S1-ZP  III.E DELETE 21 TITLE 2 Change Addition  SIRECT ADDRESS  OLIV-S1-ZP  III.E DELETE 3 1 TITLE 3 SIRECT ADDRESS  OLIV-S1-ZP  III.E DELETE 3 1 TITLE 3 SIRECT ADDRESS  OLIV-S1-ZP  III.E CHANGES CH	CORAL	L GABLES FL 33134		-	1 04			
11. Pursuant to the provisions of Sections 607.0502 and 607.1509. Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such rating was authorized by the corporation's bard of directors. I hereby accept the appointment as registered agent. I am SIGNATURE    Signature   S					/			,
SIGNATURE	11. Pursuant to	the provisions of Sections 607.050	2 and 607,1508, Florida Statuti	es, the abov	e-named corpo	pration submits this statement for the purp		s registered office
SIGNATURE	familiar with	ed agent, or both, in the State of Flor n, and accept the obligations of, Sec	ida. Such change was authorizi tion 607.0505. Florida Statutes	ed by the co	prporation's boa	ard of directors. I hereby accept the appo	intment as register	ed agent. I am
12.		,		•				İ
12.	S			Tt: Registered A	gent signature require	ed when reinstating)	DATE	
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	CITY-ST-ZiP							[

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 diethor of the dorporation of the deciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 15 Incharged, or on an efficient with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-94 (305)672.8957