

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # L97823

(3)

1. Corporate Name

SCI POWER CORPORATION

Principal Place of Business

POB 13099
SARASOTA FL 34278

Mailing Address

POB 13099
SARASOTA FL 34278

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

07/27/1990

3a. Date of Last Report

03/01/1994

4. FEI Number

59-3019769

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. 190.012,
Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. City & State

28. City & State

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, GARY
1234 CLYDE JONES RD
SARASOTA FL 34243

81. Name

82. Street Address (P.O. Box Number is Not Applicable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607, 608 and 609, 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. Use to change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and understand the provisions of Sections 607, 608, 609, Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent)

(Signature of New Registered Agent)

(Date)

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. Name

PT
SCHINDLER, MANFRED
45 BOSSIGASSE
VIENNA, AUSTRIA

1. Name

☐ Change ☐ Addition

2. Name

VPS
JONES, GARY W
512 SATURN AVE
SARASOTA FL

2. Name

☐ Change ☐ Addition

3. Name

JONES, GARY W
512 SATURN AVE
SARASOTA FL

3. Name

☐ Change ☐ Addition

4. Name

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5. Name

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6. Name

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40. Name

☐ Change ☐ Addition

SIGNATURE:

(Signature) AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/95

813-351-1895