## FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Jun 04 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # (8)ENERGY SAVINGS SYSTEMS, INC. Principal Place of Business Mailing Address C/O JOEL L. KIRSCHBAUM C/O JOEL L. KIRSCHBAUM 688 E LAS OLAS BLVD. SUITE 400 FT. LAUDERDALE FL 33301 888 E. LAS OLAS BLVD. STE 400 FT. LAUDERDALE FL 33301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1985 OFFICE PARTY OF THE PARTY OF TH 2. Principal Place of Business 28. Mailing Address FEI Number Applied For 21 90 26 65-0003788 Not Applicable \$8.75 Additional CHARLES E. JEWETT, C.P.A. 5. Certificate of Status Desired Fee Required **STAIGLLYWOOD BLVD. SUITE 20** \$5.00 May Be 6. Election Campaign Financing HOLLYWOOD, FL 33020 23 Trust Fund Contribution $\Box$ Added to Fees Zip 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KIRSOHBAUM, JOEL L. JEWETT 888 E. LAS OLAS BLVD 82 SUITE 400 83 FT. LAUDERDALE FL 33301 33620 HOLLYWOOD 11. Pursuant to the provisions of Sections C07.05.02 and C07.15.08, 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 this ge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Tam range yith, and except the obligations of Society 27.05.05. Florida Statutes. SIGNATI (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.170118 Change Addition KIRSCHBAUM, JOEL L. NAME 1.2 NAME 888 E. LAS OLAS BLVD, SUITE 400 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CHTY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2 1 11TLE ☐ Change \_\_\_ Addition WAGNER, JOSEPH NAME 2.2 NAME 888 E. LAS OLAS BLVD, SUITE 400 STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5 1 111t F Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

14. Thereby 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

-06/09/98--01074--011

\*\*\*150.00