2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Apr 14, 2003 8:00 am Secretary of State 3/ 3/ M56423 03-11-2003 90152 001 ***150.00 **DOCUMENT #** 03-11-2003 90152 002 *****8.75 1. Entity Name ENERGY-WORKS INTERNATIONAL, INC. Principal Place of Business Mailing Address 10250 COLLINS AVE PO BOX 7054 BAL HARBOUR FL 33154 #301 BAL HARBOUR FL 33154 US 2. Principal Place of Business Mailing Address 0,80 Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 65-0003378 iami Not Applicable \$8.75 Additional 5. Certificate of Status Desired 331574 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEINER-HORNSTEYN, HELENA 10250 COLLINS AVE STE 301 **MIAMI FL 33154** 3 7 8 6 -8. The above named entity at bmits 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** (NYE: Registered Agent eignature required when r FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE STEINER-HORNSTEYN, H. NAME NAME 10250 COLLINS AVE #301 STREET ADDRESS STREET ADDRESS BAL HARBOUR FL 33154 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME NAME 391 E. 322 Street STREET ADDRESS STREET ADDRESS Willowick, OH 44095 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS. CITY-ST-7/P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE MIE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11?