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May 04, 1999 8:00 am
Secretary of State

05-04-1999 90005 044 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P14293

1. Corporation Name
GATES ENERGY PRODUCTS, INC.



Principal Place of Business 900 S BROADWAY P O BOX 5887 DENVER CO 80217-5887 US	Mailing Address 900 S BROADWAY ATTN: CORPORATE TAX P O BOX 5887 DENVER CO 80217-5887 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 900 S. BROADWAY Suite, Apt. #, etc. 22 City & State 23 DENVER CO Zip 24 80209	2a. Mailing Address 26 900 S. BROADWAY Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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3. Date Incorporated or Qualified 05/04/1987	4. FEI Number 84-0616777	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES STREET SUITE 105 TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS NELSON, JIM	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	900 S. BROADWAY	1.2 NAME	
STREET ADDRESS	DENVER CO	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	DENVER CO 80209
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EATON, G.D.	2.2 NAME	
STREET ADDRESS	900 SOUTH BROADWAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO	2.4 CITY-ST-ZIP	
TITLE	DP HARRIS, B.J.	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	900 SOUTH BROADWAY	3.2 NAME	
STREET ADDRESS	DENVER CO	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	DENVER CO 80209
TITLE	AS CASTLMEN, CURTIS H	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	900 SOUTH BROADWAY	4.2 NAME	CASTLEMAN, CURTIS H.
STREET ADDRESS	DENVER CO	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	DENVER CO 80209
TITLE	AS HOGLE, MERRY ANN	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	900 SOUTH BROADWAY	5.2 NAME	
STREET ADDRESS	DENVER CO	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	T S. SAMARASINGHE
STREET ADDRESS		6.3 STREET ADDRESS	900 SOUTH BROADWAY
CITY-ST-ZIP		6.4 CITY-ST-ZIP	DENVER CO 80209

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.

SIGNATURE: C. W. Castleman ASST. SECRETARY 4/27/99 (303) 744-4685
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)