FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90126 040 ***150.00

| MICROEI | NERGY, INC. | Mailing Address | | | | | |
|---|---|---|---|--|--|-------------|----------------|
| Principal Place of Business Mailing Address | | | | | | • | |
| 350 RANDY ROAD CAROL STREAM IL 60188 | | 350 HANDY ROAD CAROL STREAM IL 60188 | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed | | | |
| | | | | | 06/07/1991 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | 1 | Applied For |
| 21 | | 26 | | | 36-3262274 | | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | • | Additional |
| 22 | | 27 | | | | | Required |
| City & State | e | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | May Be |
| Zip | Country | Zip | Country | | This corporation owes the current ye | | 4.10 1 665 |
| 24 | 25 | F . | 10 | | Personal Property Tax. | ☐ Yes | □No |
| 24 | 9. Name and Address of Current | | | | 10. Name and Address of New Regist | ered Agent | |
| THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301 | | | 82 S 83 | City | ess (P.O. Box Number is Not Acceptable) | FL L | p Code |
| office or n agent. I a SIGNATURE | egistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent | of Florida. Such change was autions of, Section 607.0505, Floridations of title if applicable. (NOTE: F | norized by the da Statutes. Registered Agent sig | corporation | oration submits this statement for the purpo on's board of directors. I hereby accept the dwhen reinstating) DA ADDITIONS/CHANGES TO OFFICEF | TE | registered |
| 12. | OFFICERS AND | D DIRECTORS DELETE | 13. | | ADDITIONS/CHANGES TO OFFICER | Chang | |
| TITLE | PCD | - | | | | | |
| NAME | Gatza, Robert G. 350 Randy Road | | 1.2 NAME 1.3 STREET AD | DRESS | | | |
| STREET ADDRESS | CAROL STREAM IL | | 1.4 CITY-ST-ZI | | | | l l |
| CITY-ST-ZIP | VST | ☐ DELETE | 2.1 TITLE | · | | Chang | e Addition |
| NAME | FANELLA, ROBERT J. | | 2.2 NAME | | | | |
| STREET ADDRESS | 350 RANDY ROAD | 2.3 \$ | | ORESS | | | |
| CITY-ST-ZIP | | | 2.4 CITY-ST-Z | IP . | | | |
| TITLE | D | DELETE 3.1 T | | | | ☐ Chang | e |
| NAME | FANELLA, ROBERT J. | | | | - ~ | | - |
| STREET ADDRESS | | | 3.3 STREET AD | | | | |
| CITY-ST-ZIP | CAROL STREAM IL | | | IP | | Chang | je Addition |
| TITLE | D DADOUANI CEODOE M | Deceie | 4.1 TITLE 4.2 NAME | | | و.سدره ليبا | |
| NAME | BRADSHAW, GEORGE M. | | 4. 2 NAME 4.3 STREET AD | IDRESS | | | } |
| STREET ADDRESS | 550 PENNSYLVANIA GLEN ELLYN IL | | | | | | ŀ |
| CITY-ST-ZIP TITLE | GLEN ELLIN IL | | | * | | ☐ Chang | je Addition |
| NAME | | _ | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREET AD | ORESS | | | |
| CITY-ST-ZIP | | | 54 CITY-ST-Z | IP | | | |
| TITLE | | ☐ DELETE | 61 TITLE | | | ☐ Chang | ge 🗌 Addition |
| NAME | | | 6.2 NAME | 1 | | | ļ |
| STREET ADDRESS | | | 6.3 STREET AD | | | |] |
| | l . | | 64 CITY-ST-Z | P | | | Į. |

14. 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 profigure 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: