

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT



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

199681-96

B-7529 C

DOCUMENT # P34847 (4)

1. Corporation Name

HY-POWER, INC. NV

Principal Place of Business

Mailing Address

5913 NW 31 AVE
FT LAUDERDALE FL 33309

5913 NW 31 AVE
FT LAUDERDALE FL 33309



3. Date Incorporated or Qualified 07/29/1991	3a. Date of Last Report 05/01/1995
4. FEI Number 88-0271249	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. 199.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

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

Signature, typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	1.1 TITLE	☐ Change ☐ Addition
NAME	PAUL-HUS, BERNARD	1.2 NAME	
STREET ADDRESS	159 SW 95TH LANE	1.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL	1.4 CITY - ST - ZIP	
TITLE	T	2.1 TITLE	☐ Change ☐ Addition
NAME	PAUL-HUS, BERNARD	2.2 NAME	
STREET ADDRESS	159 SW 95TH LANE	2.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL 33071	2.4 CITY - ST - ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	RABOLLI, STEPHEN P	3.2 NAME	
STREET ADDRESS	5913 NW 31 AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	3.4 CITY - ST - ZIP	
TITLE	S	4.1 TITLE	☐ Change ☐ Addition
NAME	GILLEN, JAMES K.	4.2 NAME	
STREET ADDRESS	5913 NW 31 AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL 33309	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	PAUL-HUS, ERIC	5.2 NAME	
STREET ADDRESS	5913 NW 31 AVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 33309	5.4 CITY - ST - ZIP	
TITLE	V	6.1 TITLE	☐ Change ☐ Addition
NAME	PAUL-HUS, STEPHANE	6.2 NAME	
STREET ADDRESS	5913 NW 31 AVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 33309	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Bernard Paul-Hus

BERNARD PAUL-HUS PRESIDENT 7/24/96 (954) 978-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Document #

9300

CR2E034 (3/96)