

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

FILED

Jun 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000040249 (3)

1. Corporation Name:
COMMERCIAL ENERGY, INC.



Principal Place of Business
1900 SKEES ROAD
W. PALM BEACH FL 33411

Mailing Address
1900 SKEES ROAD
W. PALM BEACH FL 33411

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1993

4. FEI Number

65-0507522

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ 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

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

COVEN, ROBIN
1900 SKEES ROAD
W. PALM BEACH FL 33411

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:

Robin Coven

(NOTE: Registered Agent signature required when reinstating)

4/16/98

12. OFFICERS AND DIRECTORS

TITLE: PRESIDENT
NAME: ROBIN COVEN
STREET ADDRESS: 12749 NW 19 MANOR
CITY-ST-ZIP: CORAL SPRINGS, FL 33071

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

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.

SIGNATURE:

Robin Coven

4/16/98

561 607-2721

CR2E034 (10/97)