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

NAME

STREET ADDRESS

SIGNATURE:

CITY ST-74P

FILED Feb 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P93000066509 **ENERGY GENERATION SOLUTIONS, INC.** Principal Place of Business Mailing Address 606 14TH AVENUE NE 606 14TH AVENUE NE ST PETERSBURG FL 33701 ST PETERSBURG FL 33701 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3218706 Not Applicable 26 Suite, Apt. #, etc Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Zip Country Zio Country B. This corporation owes or has paid the current year Intangible X Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name COFFIN. ERIC H **606 14TH AVENUE NE** Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33701 83 84 City 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

Signature, typed or purpose before the purpose agent age OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELE 1E 1.1 TITLE Change Addition COFFIN, ERIC H NAME 1.2 NAME **606 14TH AVE NE** STREET ADDRESS 1.3 STREET ADDRESS **ST PETE FL 33701** CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 21 TITLE Change Addition NAME COFFIN, CRISTINA W 22 NAME 606 14TH AVE NE STREET ADDRESS 23 STREET ADDRESS **ST PETE FL 33701** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY - ST - ZIP DELETE Addition 5.1 TITLE Channe TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP ___ Addition DELETE 6.1 TITLE Change

62 NAME

14. I hereby certify that the information supplied with this thing 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 suppliemental arrival 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 13 if changed, or on an attachment with an address.

6 3 STREET ADDRESS 6.4 CITY-ST-ZIP

EAIC

H. COFFIN

2-9-98

(8/3)

822-0385