ANNUAL REPORT
1995

Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000074631 (1)

1. Corporation Name
CENTERGY ELECTRO POWER SYSTEMS, INC.

Principal Place of Business	Mailing Address
1155 HILLSBORO MILE (AIA) SUITE 602 HILLSBORO BEACH FL 33062	1155 HILLSBORO MILE (AIA) SUITE 602 HILLSBORO BEACH FL 33062

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/21/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21):
2a. Mailing Address (26):

Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):

City & State (23):
City & State (28):

Zip (24): Country (25): Zip (29): Country (30):

4. FEI Number: 59-3236212 ☐ 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

9. Name and Address of Current Registered Agent

HOWELL, RONALD R
118 EAST JEFFERSON ST.
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Howell, RONALD R
82 Street Address (P.O. Box Number is Not Acceptable): 319 N. MAGNOLIA Ave.
83
84 City: ORLANDO FL 85 Zip Code: 32801

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 familar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☑ Change ☐ Addition
NAME	LEIBOWITZ, MARTIN N	12 NAME	
STREET ADDRESS	1155 HILLSBOEO MILE (AIA) #602	13 STREET ADDRESS	1155 Hillsboro Mile (AIA) #602
CITY-ST-ZIP	HILLSBORO BEACH FL 33062	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☑ Change ☐ Addition
NAME	HOWELL, RONALD R	22 NAME	D Howell Ronald R
STREET ADDRESS	118 EAST JEFFERSON ST.	23 STREET ADDRESS	319 N. MAGNOLIA Ave
CITY-ST-ZIP	ORLANDO FL 32801	24 CITY-ST-ZIP	ORLANDO FL 32801
TITLE	D	31 TITLE	☑ Change ☐ Addition
NAME	LEIBOWITZ, PATRICIA	32 NAME	
STREET ADDRESS	1155 HILLSBORO MILVE (AIA) #602	33 STREET ADDRESS	1155 Hillsboro Mile (AIA) #602
CITY-ST-ZIP	HILLSBORO BEACH FL 33062	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☑ Change ☐ Addition
NAME	VELARDI, DAVID	42 NAME	
STREET ADDRESS	3191 S.W. 11TH ST ., BLDG. 2	43 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH	44 CITY-ST-ZIP	33442
TITLE	D	51 TITLE	☑ Change ☐ Addition
NAME	SHOUP, GEOFFREY R	52 NAME	D Rubin Howard K
STREET ADDRESS	148 ISLE OF VENICE	53 STREET ADDRESS	5000 S. Ocean Dr #J
CITY-ST-ZIP	FT. LAUDERDALE FL	54 CITY-ST-ZIP	Hollywood FL 33019-0000
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(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: Patricia Leibowitz Sec/Treas. 4-21-95 3054806485
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
PATRICIA Leibowitz SEC. TREAS.

010A00 CP