FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P94000011759 (5) DOCUMENT # 1. Corporation Name

ADVANCED ENERGY RESEARCH, INC.

Principal Place of Business Mailing Address 305 N.W. 22ND STREET 305 N.W. 22ND STREET



DELRAY BEACH FL 33444		DELRAY BEACH FL 33444							
						3. Date Incorporated or Qualified 02/08/1994	3a. Date o	f Last F	•
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number	1,		Applied For
21		26			65-0481891 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required	
City & State		City & State				6. Election Campaign Financing		\$5.0	0 May Be
3		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip		untry		8. This corporation has liability for it		under s	199.032,
24	25	29	30				Z-No		
	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New R	egistereo A	jent	
					Name				
	s, arden b			82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
	. 22ND STREET			83	<u> </u>				
DELRAY	BEACH FL 33444			03					
				84	City		C1	85 Z	ip Code
						ration submits this statement for the pur	occo of char	oinc its	registered office
SIGNATURE	Signature, typed or printed name of registered agent				nt signature require		DATE	DIDECT	ODC IN 12
12.	OFFICERS AN	ID DIRECTORS	13			ADDITIONS/CHANGES TO OFF		Change	
TITLE	D	DELETE.		TITLE			لبيا	Grange	LT MODITION
NAME	WALTERS, CYNTHIA M			NAME					
STREET ADDRESS	305 N.W. 22ND STREET				1 ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL 33444	DELETE		TITLE	ST - ZIP			Change	Addition
TITLE	D ANDEN B	_ виси		NAME					
NAME STREET ADDRESS	WALTERS, ARDEN B 305 N.W. 22ND STREET		1		T ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL 33444				\$1-2IP	a de la companya de			
TITLE	DELINAL DESCRIPTE CONTY	☐ DELETE		1 TITLE				Change	Addition
NAME			3.2	NAME					
STREE1 ADDRESS			3 3	STREE	ET ADDRESS				
CITY-ST-ZIP			3.4	CITY	\$1-71 ^p				
TITLE		DELETE	4	1 THLE			L.] Change	Addition
NAME				NAME					
STREET ADDRESS					LADDRESS				
DITY-ST-ZIP		☐ DELETE		CITY - 1 TITLE	ST- ZIP) Change	Addition
TITLE		[_] otten		NAME			_	j Onange	, [] 1.554.51
NAME CAREET ADORSES					ET ADDRESS				
STREET ADDRESS					ST-ZIP				
CITY-ST-ZIP TITLE	<u> </u>	DELFTE		1 TITLE				Change	Addition
NAME		/ W	1	2 NAME				_	
STREET ADDRESS					ET ADDRESS				
CITY-SI-ZIP					-ST-7IP				
001-01-65	1								

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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 14 or an attachment with an address.

SIGNATURE: