

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000035149 (1)

1. Corporation Name

ENERGY DEVICES, INC.



Principal Place of Business

7508 N.W. 54TH STREET
MIAMI FL 33166

Mailing Address

7508 N.W. 54TH STREET
MIAMI FL 33166

3. Date Incorporated or Qualified
05/06/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0490454

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

JON L. GROSSMAN

82 Street Address (P.O. Box Number is Not Acceptable)

7508 N.W. 54TH ST

83

84 City

MIAMI

FL

85 Zip Code

33166

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

Jon L. Grossman

4/15/96

12. OFFICERS AND DIRECTORS

TITLE D / CEO
NAME GROSSMAN, JON L
STREET ADDRESS 375 HAMPTON LANE
CITY- ST- ZIP KEY BISCAYNE FL 33149

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

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21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

25

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

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41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

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51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

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61 TITLE

62 NAME

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64 CITY- ST- ZIP

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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 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:

Jon L. Grossman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JON L. GROSSMAN
CEO

4/15/96 305-544-5723

CR2E034 (12/95)