

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

DOCUMENT # P94000040598 (2)

1. Corporation Name

ENERGY TECHNOLOGY SYSTEMS, INC.



Principal Place of Business

Mailing Address

5017 ROSEN BOULEVARD  
BOYNTON BEACH FL 33437

5017 ROSEN BOULEVARD  
BOYNTON BEACH FL 33437

3. Date Incorporated or Qualified

05/31/1994

3a. Date of Last Report

08/22/1995

2. Principal Place of Business

2a. Mailing Address

21 2559 Webb Avenue

26 2559 Webb Avenue

4. FEI Number

65-0498629

Applied For

Not Applicable

22 Suite 4

27 Suite 4

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

23 Delray Beach, Fl.

28 Delray Beach, Fl.

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

24 33444-4365

Country

29 33444-4365

Country

U.S.A.

8. This corporation has liability for intangible tax under s 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAHAMOVITCH, DONALD E  
7770 W OAKLAND PARK BLVD.  
SUITE 470  
SUNRISE FL 33351-6746

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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

S ☐ Change ☒ Addition

NAME KLEE, JAMES G  
STREET ADDRESS 5017 ROSEN BOULEVARD  
CITY-STATE-ZIP BOYNTON BEACH FL 33437

1.2 NAME

Sizemore, Kevin  
3548 Maleluca Lane Garage Unit  
Lake Worth, Fl. 33461

TITLE ☐ DELETE

2.1 TITLE

☐ Change ☐ Addition

NAME KLEE, JESSICA  
STREET ADDRESS 5017 ROSEN BOULEVARD  
CITY-STATE-ZIP BOYNTON BEACH FL 33437

2.2 NAME

TITLE ☐ DELETE

2.3 STREET ADDRESS

☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

2.4 CITY-STATE-ZIP

TITLE ☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

3.2 NAME

TITLE ☐ DELETE

3.3 STREET ADDRESS

☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

3.4 CITY-STATE-ZIP

TITLE ☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/9/96 (407) 274-7064

CR2E034 (12/95)