

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 # P95000017533 (7)

1. Corporation Name

ABSOLUTE POWER & TECHNOLOGIES, INC.



Principal Place of Business

1645 PALM BEACH LAKES BLVD.
SUITE 280
WEST PALM BEACH FL 33401

Mailing Address

1645 PALM BEACH LAKES BLVD.
SUITE 280
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified

03/02/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 4053 Ilex Circle No

26 4053 Ilex Circle No

4. FEI Number

65-0574287

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23 Palm Beach Gardens FL

28 Palm Beach Gardens FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33410

25 Palm Beach

29 33410

30 Palm Beach

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

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

81 Name

Jill R. MAC ALLISTER

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

4053 Ilex Circle North

83

84

City Palm Beach Gardens

FL

85

Zip Code 33410

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

J.R. Mac Allister

Jill R. MAC ALLISTER

February 19, 1996

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

(NOTE: Registered Agent signature required when re-registering.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME MAC ALLISTER, JILL R
STREET ADDRESS 1645 PALM BEACH LAKES BLVD., SUITE 280
CITY-ST-ZIP WEST PALM BEACH FL 33401

1.1 TITLE President/Treasurer ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 4053 Ilex Circle No
1.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE T
NAME GUGLIOTTA, LOUIS A
STREET ADDRESS 1645 PALM BEACH LAKES BLVD., SUITE 280
CITY-ST-ZIP WEST PALM BEACH FL 33401

2.1 TITLE Eugene Burdick ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS Vice President
2.4 CITY-ST-ZIP 3574 Pinehurst Dr.
Lake Worth, FL 33467

TITLE S
NAME MAC ALLISTER, TED D
STREET ADDRESS 1645 PALM BEACH LAKES BLVD., SUITE 280
CITY-ST-ZIP WEST PALM BEACH FL 33401

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 4053 Ilex Circle No
3.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE V
NAME MAC ALLISTER, SCOTT
STREET ADDRESS 1645 PALM BEACH LAKES BLVD., SUITE 280
CITY-ST-ZIP WEST PALM BEACH FL 33401

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE V
NAME HILL, ROD
STREET ADDRESS 1645 PALM BEACH LAKES BLVD., SUITE 280
CITY-ST-ZIP WEST PALM BEACH FL 33401

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 4053 Ilex Circle No
5.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE V
NAME ANDERSON, JIM
STREET ADDRESS 1645 PALM BEACH LAKES BLVD., SUITE 280
CITY-ST-ZIP WEST PALM BEACH FL 33401

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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: J.R. Mac Allister Jill R. MAC ALLISTER February 19, 1996 (407) 775-6995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)