

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 13 1997 8:00am
Secretary of State

DOCUMENT # P95000060297 (5)

1. Corporation Name
ENERGY TECHNOLOGIES, INC.



Principal Place of Business

Mailing Address

~~3000 NW 140 STREET
SUITE 9000
NORTH MIAMI BEACH FL 33160~~

~~3000 NW 140 STREET
SUITE 9000
NORTH MIAMI BEACH FL 33160~~

2. Principal Place of Business

2a. Mailing Address

21 2327 DESTINY WAY
Suite, Apt. #, etc.

26 2327 DESTINY WAY
Suite, Apt. #, etc.

22 City & State
Odessa, Florida

27 City & State
Odessa, Florida

23 Zip Country
33556 USA

28 Zip Country
33556 U.S.A.

24 33556 25 USA

29 33556 30 U.S.A.

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

08/04/1995

11/25/1996

4. FEI Number

Applied For

65-0606182

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

10. Name and Address of New Registered Agent

81 Name

EUGENE L. CORNETT II

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

21437 CLUBSIDE LOOP

83

84 City

LUTZ

FL

85 Zip Code

33549

11. Pursuant to the provisions of Sections 607.0602 and 607.0508, 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 EUGENE L. CORNETT II 4-28-97
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
NAME DP
STREET ADDRESS LITOWICH, J. A.
CITY - ST - ZIP 285 NE 185 STREET, SUITE 24
MIAMI FL 33179-4509

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME DST
STREET ADDRESS FARKAS, M D
CITY - ST - ZIP 660 MADISON AVE. 14TH FLOOR
NEW YORK NY 10021

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME CHAIRMAN - DIRECTOR
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME DVP
STREET ADDRESS CORNETT, E L
CITY - ST - ZIP 2327 DESTINY WAY
ODESSA FL 33556

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 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, unchanged, or on an attachment with an address.

SIGNATURE: EUGENE L. CORNETT II 4-15-97 813-376-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0004026

CR2E034 (9/96)