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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000084627 (5)
1. Corporation Name

THE POWER BUYING SOURCE, INC.

Mailing Address Principal Place of Business 3111 STIRLING ROAD 3111 STIRLING ROAD FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 3a. Date of Last Report 3. Date Incorporated or Qualified 11/03/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business
21 | 04 | PARK Ave Not Applicable 1041 PARK \$8.75 Additional Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199 032. Yes No \overline{arphi} S $oldsymbol{\mathsf{A}}$ Florida Statutes 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent A1 Name Street Address (P.O. Box Number is Not Acceptable) ROSEN, GARY C 82 3111 STIRLING ROAD 83 FT. LAUDERDALE FL 33312 Zip Code 85 84 City 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 607.0506, Florida Statutes.DATE INVITE. Buy stored Agent suprations to some twheel recisionally SIGNATURE CR2E034 (12/95) Signature, typical or principal matrix, of registered agreed as of the et application ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition 1 1 TITLE DELETE TITLE 1.2 NAME GLICKMAN, MICHAEL NAME 1.3 STREET ADDRESS 1041 PARK AVE. SUITE 100 STREET ADDRESS 14 CITY - ST - ZIP **BOCA RATON FL 33486** CITY-ST-Z-P Change Addit on DELETE 2 THRE TiT: F 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CHTV - ST - ZIP Addition CITY-ST-ZIP Change DELETE 3 1 TOLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP Change CITY-ST-ZIP Addition DELETE 4 1 TITLE 400001829964 TiTLE 4.2 NAME -05/20/06--01059--029 NAME 4.3 STREET ADDRESS STREET ADDRESS ***200.00 4.4 CITY - ST - ZIP CITY - ST - ZIP Addition Change DELETE 5 1 TITLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - S" - ZIP Addition ☐ Change DELETE 6 1 TiTLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 cath; 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:

AND TYPES OR PRINCE NAME OF SIGNING OFFICER OR DIRECTOR

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