

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000017534

1. Entity Name

AMERICAN ENERGY TECHNOLOGIES, INC. ✓

FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90029 028 ***550.00

Principal Place of Business Mailing Address
 1057 ELLIS ROAD N 1057 ELLIS ROAD N
 UNIT 4 UNIT 4
 JACKSONVILLE FL 32254 JACKSONVILLE FL 32254
 US US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3433245

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH HULSEY & BUSEY
 225 WATER STREET
 SUITE 1800
 JACKSONVILLE FL 32202

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPS ☐ Delete
 NAME SQUIRES, RICHARD
 STREET ADDRESS 1057 ELLIS RD N
 CITY-ST-ZIP JACKSONVILLE FL 32254

TITLE DPCEO ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DV ☒ Delete
 NAME HOHLE, THOMAS
 STREET ADDRESS HESSEGASSE 30 RH 11
 CITY-ST-ZIP 1220 VIENNA, AUSTRIA

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DV ☒ Delete
 NAME FEDRIZZI, THOMAS
 STREET ADDRESS BAHNHOFPLATZ 9
 CITY-ST-ZIP 8023 ZURICH, SWITZERLAND

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DC ☐ Change ☒ Addition
 NAME PLEUGER, HANS
 STREET ADDRESS BAARERSTRASSE 94, POSTFACH 2129
 CITY-ST-ZIP CH-6303 ZUG, SWITZERLAND

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VTS ☐ Change ☒ Addition
 NAME VALK, JEROME E.
 STREET ADDRESS 1057 ELLIS RD., N.
 CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

RICHARD SQUIRES,

SIGNATURE:

Richard Squires PRESIDENT

(904) 781-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)