## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 15, 2001 8:00 am Secretary of State DOCUMENT # **P96000017534** 05-15-2001 90010 030 \*\*\*150.00 AMERICAN ENERGY TECHNOLOGIES, INC. Principal Place of Business Mailing Address 1057 ELLIS ROAD N 1057 ELLIS ROAD N 653771 HNIT 4 JACKSONVILLE FL 32254 JACKSONVILLE FL 32254 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3433245 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH HULSEY & BUSEY Street Address (P.O. Box Number is Not Acceptable) 225 WATER STREET **SUITE 1800** JACKSONVILLE FL 32202 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. X Change CR2E034 (10/00) ☐ Delete TITLE TITLE SQUIRES, RICHARD SQUIRES, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 1057 ELLIS RD N 1057 ELLIS RD N CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32254 JACKSONVILLE, FL 32254 ☐ Change X Addition X Defete TITLE TITLE HANS PLEUGER NAME HOHLE, THOMAS NAME STREET ADDRESS **ELISABETHENANLAGE 9** HESSEGASSE 30 RH 11 STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP 1220 VIENNA, AUSTRIA CH-4051 BASEL TITLE ☐ Change X Addition X Defete TITLE JEROME E. VALK FEDRIZZI. THOMAS NAME NAME STREET ADDRESS 6517 CARDINAL CREST DR. STREET ADDRESS **BAHNHOFPLATZ 9** CITY-ST-ZIP NEWPORT RICHEY, FL 34655 CITY-ST-ZIP 8023 ZURICH, SWITZERLAND Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 recurred by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

(904) 781-7000

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: W. RICHARD SQUIRES