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



DOCUMENT # P96000062092 (7)

PROFIT CORPORATION ANNUAL REPORT 1997	F LORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT #	P96000062092 (7)
	NOLOGIES INCORPORATED
AGRO-VOLTAIC TECH	NOLOGIES INCORPORATED
AGRO-VOLTAIC TECH	Marling Address 11653 MANDARIN FOREST DRIVE

FILED Apr 21 1997 8:00am Secretary of State



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JAOKSONVILL	IRIN FOREST DRIVE E FL 32223	11653 MANDARIN FORES JACKSONVILLE FL 32223					
y y					3. Date Incorporated or Qualified 07/24/1996	3a. Date of La	st Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	-1	Applied For
21	_	26			59-333487	3 [Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	75 Additional e Required
City & Stat 23	е	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip 24	Country 25	<i>Z</i> ip 29	30	lry		Yes No	er s. 199.032,
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	gistered Agent	
	EDMAN, SCOTT E		8	1 Name			
	153 MANDARIN FOREST DRIVE XKSONVILLE FL 32223				ddress (P.O. Box Number is Not Acceptab	ole)	
	•		8	3			
***	8 .			4 City		FL 1	Zip Code
SIGNATURE	m familiar with, and account the con-	~			orporation submits this statement for the paration's board of directors. I hereby acceptionally acception to the property of t	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D CONTRACT	DETEIE	, 1.1 Titul	i		L. Char	ige L Addition
NAME OTREE ADDRESS	FRIEDMAN, SCOTT E 11653 MANDARIN FOREST I	DDIVE	1.2 NAM	· .			
STREET ADDRESS City-St-Zip	JACKSONVILLE FL 32223	NITTE.		ET ADDRESS			
TITLE	D	DELETE	2.1 TITLE	-SI - ZIP		Char	ge Addition
NAME	FRIEDMAN, MICHAEL		2.2 NAM	[_
STREET ADDRESS	11853 MANDARIN FOREST (DRIVE	2.3 STRE	TT ADDRESS	•	. *.	
CITY-ST-ZIP	JACKSONVILLE FL 32223			'-SI-7IP			
TITLE	D Friedman, Gerald	☐ DELFTE	3.1 1171.8			☐ Char	ige L. Addition
NAME STREET ADDRESS	3137 ISSER LANE		3.2 NAM	E E1 ADORESS			
CITY-ST-ZIP	JACKSONVILLE FL 32257		1	-ST-ZIP			
TITLE	D	DELETE	4.1 TITLE			Char	ige Addition
NAME	ZIPPER, KEITH J		4. 2 NAM	lt			
STREET ADDRESS	12346 PEACH ORCHARD DE	RIVE	4.3 STRE	ET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32223		4.4 C(1)				
TITLE		DELETE	5.1 1(1)			☐ Char	ge Addition
NAME CENTRAL ADDRESS			5.2 NAM	-			
STREET ADDRESS				ET ADDRESS (ļ
CHTY-ST-ZIP		DELETE	5.4 City 6.1 Title			Char	ge Addition
NAME		******	6.2 NAM				
STREET ADDRESS				FT ADDRESS			
CITY-ST-ZIP			6.4 CITY	1			
43 13- 6	the second secon	1 21 11 70			1- 41- 0 - 41- 440 03(0V). Fig. 13- 01-14-1-		

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 if charged, or on an attachment with an address.