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Secretary of State
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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000077935**

1. Corporation Name
PREUSSAG ENERGIE AMERICAS, INC.

Principal Place of Business	Mailing Address
200 VS BISCAYNE BLVD STE 4440 MIAMI FL 33131 US	200 S BISCAYNE BLVD STE 4440 MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 09/18/1996

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

4. FEI Number: 65-0701649 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 owes the current year intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SPENCER, THOMAS R JR.
801 BRICKELL AVENUE
SUITE 1901
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: Axel Heydasch
82 Street Address (P.O. Box Number is Not Acceptable): New World Tower
83: 100 North Biscayne Blvd 30th FL
84 City: Miami FL 85 Zip Code: 33132

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 607.0505, Florida Statutes.

SIGNATURE _____ 1/19/99
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	PD	☐ DELETE	1.1 TITLE	Hantelmann, Georg. V Dir	☒ Change ☐ Addition
NAME	HANTLEMAN, GEORGE V DR.		1.2 NAME		
STREET ADDRESS	WALDSTRASSE 39		1.3 STREET ADDRESS		
CITY-ST-ZIP	LINGEN, GERMANY		1.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MADER, MARK R		2.2 NAME		
STREET ADDRESS	200 S. BISCAYNE BLVD. STE 4440		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33131		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HAGEMANN, WULF		3.2 NAME		
STREET ADDRESS	WALDSTRASSE 39		3.3 STREET ADDRESS		
CITY-ST-ZIP	LINGEN,GERMANY 49808		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	FEUERBORN, HEINZ-GEORG		4.2 NAME		
STREET ADDRESS	WALDSTRASSE 39		4.3 STREET ADDRESS		
CITY-ST-ZIP	LINGEN, GERMANY 49808		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	HAGEN, JOSEF		5.2 NAME		
STREET ADDRESS	WALDSTRASSE		5.3 STREET ADDRESS	Waldstrasse 39	
CITY-ST-ZIP	LINGEN, GERMANY 49808		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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

SIGNATURE: _____ 1/5/99 305-577-5400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #