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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 09 1997 8:00am

Secretary of State

# 1020/4010 400 400/10 E100/ 0200/ 0200/ 0200/ 0200/ 0200/ 0200/ 0200/ 0200/ 0200/

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600081640 (0)

ALTERNATIVE ENERGY TECHNOLOGIES, INC.

Principal Place of Business Mailing Address								-{				<b>]]</b>	
2825 TAMIAMI		Mailing Address									•	1011 1001	
PUNTA GORDA FL 33950				P.O. DRAWER 1447 PUNTA GORDA FL 33951-1447									
									3. Date Incorporated or Qualified 10/02/1996	3a. Da	e of La	ast Re	port
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			Ap	plied For
21				26 Post Office Drawer				11447	1.5 071711-				Applicable
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					60 75				
22				27					5. Certificate of Status Desired	Ш			quired
City & State				City & State					6. Election Campaign Financing \$5.00 May Be				
23				28 Punta Gorda, FL					Trust Fund Contribution Added to Fees				
Zip	· · · · · · · · · · · · · · · · · · ·		L '			Country			8. This corporation has liability for i	nlangible (	ak und	ler s.	199 032,
24 25				29 33951-1447 30 U.S.A.					Florida Statutes ☐ Yes ☐ No				
9, Name and Address of Current Registered Agent HACKETT JACK O II 81									10. Name and Address of New Registered Agent				
HACKETT, JACK O II						61	Na	me					
115 WEST OLYMPIA AVENUE PUNTA GORDA FL 33950							Street Addres		ss (P.O. Box Number is Not Acceptab	le)			
							City	,		<b></b>	85	Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was aut agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.							1	ad same		FL_	Ш,		
office or	registered agent, or i	ooth, in the State of	Florig	da. Such change was	authoria	ed by	y the d	orporatio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of a	changii intmen	ng its Las r	registered eaistered
agent. I a	am familiar with, and	accept the obligat	ions of	, Section 607.0505, FI	orida S	atute	S.		· "				<b>3</b>
SIGNATURE	Signature, lyped or printed	name of registered sount	and title	d poplicable (AIC)	II Boolete	and Ana	ord elem	the second and					
12. OFFICERS AND							stered Agent signature required		ADDITIONS/CHANGES TO OFFICE	DATE ERS AND	DIREC	TOR	2 INI 12
TIFLE	PID	<del></del>				1.1 11716		T	TOPHIOTOGOTH MADE TO OFFICE		Char		Addition
NAME	KONOVER, RICHARD M			1.2 N/			NAME			•		·y·	LJ NOOMION
STREET ADDRESS	CASA DADIOLAN COLIDA						1.3 STREET ADDRESS						
CITY-ST-ZIP	CITY-ST-ZIP PUNTA GORDA FL 33950						ST - 71P						
TITLE	VSD			DELETE			2.1 TITLE				Char	ne	Addition
NAME	JACOBS, RAY T						2.2 NAME			•		.9.	
STREET ADDRESS	AAAAA AATA MADNIA AAN						2.3 STREET ADDRESS						
CITY-ST-ZIP	DUNTA CORDA EL AGORA						2 4 CITY-S1-ZIP						
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NAME	NE · ~			3.2 N			2 NAME				-	•	
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NAME				4 2 N			2 NAME			_		-	
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	I							- 1				a ^	

14. 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 receive) 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 in change it, or an an allatinment with an address.