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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name P96000085957 (4)

US ENERGY SURVEYS, INC.

**FILED** Feb 09 1998 8:00am Secretary of State



Finicipal Flace of Business		mating Address		
8000 S ORANGE AVE STE 104 ORLANDO FL 32809		8000 S ORANGE AVE STE 104 ORLANDO FL 32809		
OND NO	. 04.000	ONDANDO PE 32009		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				10/17/1996
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		<b>59-3406055</b> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		60.75
22		27		<b>5.</b> Certificate of Status Desired Fee Required
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		30	Personal Property Tax due June 30. Yes No
	g, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent
GU	ISTINO, JAMES A		81 Na	me
218	80 PARK AVE NORTH STE 324		82 Sin	eet Address (P.O. Box Number is Not Acceptable)
WI	NTER PARK FL 32789	•		sel Address (F.O. Box Nullibel is Not Acceptable)
			83	
			84 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508 Florida Statuto	s the should non	ned corporation submits this statement for the purpose of changing its registered
Office of f	registered agent, or both, in the Sta im familiar with, and accept the obt	ale of Florida. Such change was a	uthorized by the i	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE	: Registered Agent sign	ature required when reinstating) DATE
12.	OFFICERS A	IND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	LENAZ, EDWARD M		1.2 NAME	
STREET ADDRESS	8000 S ORANGE AVE STE	104	1.3 STREET ADDRE	29
CITY-ST-ZIP	ORLANDO FL 32809		1.4 CITY-ST-ZIP	
TITLE	<u></u>	DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	Change C Admini
STREET ADDRESS				
			2.3 STREET ADDRE	
CITY-ST-ZIP TITLE	<u> </u>	DELETE	2. 4 CITY-ST-ZIP	
		L.J DELETE	3.1 TITLE	L] Change [] Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRE	SS
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 11TLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	SS
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE	<del></del>	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	es
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE	<u> </u>	DELETE	61 TITLE	Change Addition
NAME		_	62 NAME	Thungs I had her
STREET ADDRESS			63 STREET ADDRES	2:
				»
CITY-ST-ZIP	ertify that the information supplied	with this filing does not qualify for	6.4 CITY-ST-ZIP	aled in Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or o	on t <b>his</b> annual redort of suppliemen	ital annual report is true and accu ceiver or truster, empowered to ei	rate and that my	aled in Section 119.07,300, Florida Statutes Fromer certify that the information signature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in
	in and an an analysis on an an			