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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700004363 (2)

ENERGY CONSERVATION SERVICES, INC.

Principal Place of Business Mailing Address 3801 8WANN AVE # 206 3601 SWANN AVE #206 **TAMPA FL 33609** TAMPA FL 33609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>01/06/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 59-34/6/35 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. # 200 \$8.75 Additional 5. Certificate of Status Desired #201 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country $Z_{(p)}$ Country 8. This corporation owes or has paid the current year Intangible 24 30 Yes Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FERNANDEZ, LARRY 3601 SWANN AVE # 200 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33609 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTF: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE PRESIDENT LARRY FERNANDEZ TITLE 1.1 TITLE Addition ☐ Change NAME 1.2 NAME 3919 SWANN AVENUE STREET ADDRESS 1.3 STREET ADDRESS 33609 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change 5.1 TITLE ■ Addition NAME 5.2 NAME

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 recoiver 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, of on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 City - ST - ZIP

5.4 CITY - ST - ZIP

61 TITLE

62 NAME

☐ DELETE

CR2E034 (10/97)

Change

Addition

FILED

Jan 22 1998 8:00am

Secretary of State