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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**19**98 DOCUMENT #

P97000069729 (6)

ADVANCED ENERGY TECHNOLOGIES INC.

**FILED** Jun 01 1998 8:00am Secretary of State



				1
Principal Place of Business	Mailing Address		T TOOLIGOUS SIN TOURS COME ON THE ORIGINAL PRINT SHAND THE SERVE THE STATE T	ji
7867 W SAMPLE RD SUITE 222 CORAL SPRINGS FL 33065	7667 W SAMPLE RD SUITE 222 CORAL SPRINGS FL 3	13065	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified 08/11/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For	
21	26		✓ Not Applical	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	
City & State	City & State	- <u> </u>	Election Campaign Financing     Trust Fund Contribution     Added to Fees	
Zip	Zip	Country	8. This corporation owes or has paid the current year Intaggible	
24 25 25 Name and Address of Current	Registered Agent	30	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
SEAMAN, TERRI	Manager Agent	81 Name	IV. Harrie and Address of New Hegistered Agent	
7667 W SAMPLE RD		82 Street Add	dress (F.O. Box Number is Not Acceptable)	_
SUITE 222 CORAL SPRINGS FL 33065		83 Sirver Add	oress (F.O. Box number is not Acceptable)	
DOME STAINES PE 33003		84 City	<b>==</b> 85 Zip Code	$\dashv$
		- "	<b>FL</b>   **   *   *   *   *   *   *   *   *	
office or registered agent, or both, in the State agent. Lam familiar with, and accept the obligate SIGNATURE.  Signature typed or professional of registerious per	of Florida, Such change was tions of, Section 607 0505, Fl	authorized by the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered when reinstating.  DATE	t t
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\dashv$
TITLE AVIJOR O	DELETE	11 10LE	Change Addit	ion
NAME TERRISEANAL		12 NAME		İ
NAME TERRI SEAMAN STREET ADDRESS 4420 NW 67th 5+ 45 CITY-ST-ZIP TITLE	0+101	1.3 STREET ADDRESS		
CITY-ST-ZIP DECK FIELD beh FI	33442-	1.4 CITY - S1 - ZIP		
	DELFTE	2 1 TITLE	Change Addition	ion
NAME		2 2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addit	ion
NAME		3.2 NAME	<b>,</b>	
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addild	ion
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		Ì
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STREET ADDRESS		6.2 NAME		- 1
1		6.3 STREET ADDRESS		
CITY-ST-ZIP  14. Thereby certify that the information supplied wit	this filing does not qualify f	6.4 City-ST-ZIP or the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the informatic	on I

indicated on this around report or supplemental around report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusker empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attachment with in address

4-9-98