2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # P99000021025 02-09-2006 90045 029 ***150.00 ENERGY 2000 OF USA INC. Maifing Address Principal Place of Business 1840 N 56TH AVENUE HOLLYWOOD FL 33021 1840 N 56TH AVENUE HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apr. # etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number Applied For City & State City & State 65-0919106 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZOLTAN, HAVASY Street Address (P.O. Box Number is Not Acceptable) 1840 N 56TH AVENUE **HOLLYWOOD FL 33021** City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when roinstating) FILE NOW!!! FEE IS \$150.00 (5) \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Addition TITLE ☐ Delete ☐ Change HAVASY, ZOLTAN JR. NAME NAME STREET ADDRESS STREET ADDRESS 1840 N. 56TH AVENUE CITY-ST-7IP CITY-ST-7IP HOLLYWOOD FL 33021 ۷P **B** Delete Change ☐ Addition TITLE TITLE NAME NAME BERNARD, STEPHANE STREET ADDRESS STREET ADDRESS 419 14TH AVENUE/LA GUADELOUPE CITY-ST-ZIP QUEBEC CANADA GOM 1GD CITY-ST-7IP Delete TITLE Change ■ Addition TITLE NAME NAME BEAUDOIN, DOROTHEE STREET ADDRESS STREET ADDRESS 1840 N. 56TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 TITLE TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 Irustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

like empowered.

if changed, or on an attachment with an address, with all other

FILED

Feb 09, 2006 8:00 am