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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # V48891

1. Corporation Name

ADVANCED ENERGY MANAGEMENT CORPORATION

Principal Flace	e of Business	Mailing Address		I (\$80) Atrênt Blost (Blot repla (Brêt trên aren Blot, aren graft a.e.)	
9960 NW 116 WAY 9960 NW 116 WAY					
#4 #4				DO NOT WRITE IN THIS SPACE	
MEDLEY FL 33178 MEDLEY FL 33178 US US			3. Date incorporated or Qualified		
US		US		07/07/1992	
2 Principal Pl	ace of Rusiness	2a. Mailing Address		4. FEI Number Applied For	
2. Principal Place of Business 21 3006 Staling Rd 28 3006 Staling			alina Ro		
21 3006 Stirling ld 26 3006 Stirling Suite, Apt. #, etc.				\$8.75 Additional	
22 27				5. Certificate of Status Desired Fee Required	
City & E tate	e	City & State		6. Election Campaign Financing \$5.00 May Be	
23 Holl	ywood, Florida	28 Hollyword	, Florida	Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	
24 55	02 25 054	29 2 3302 30	USA	Personal Property Tax. Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
DOV	I E MADTIN		81 Name-	John Lavidson	
DOYLE, MARTIN 9344 NW 13TH ST 82 Street Audress (P.O. Box Number is Not Acceptable)					
200	3000 3110104 0000				
1	2C0 MIAMI FL 33172				
MICH	84 City 1 1 E1 85 Zip 2002 1				
1 to 11 wood Telescope of changing its peristered					
11. Pursuent to the provisions of Sections 607.0502 and 607.1508, Florida Stati tes, 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 purpose on of, Section 607.0505, Florida Statutes.					
agent. I am familiar with, and dispept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATUF:E Signature, typed of profiled (if the consistence open and title if applicable (NOT E: Registered Agent signature required when reinstating) DATE					
12.	Signature, typed of ported no ne desistered agent OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE	D	☐ DELETE	1.1 TITLE	Change Addition	
NAME	BAKES, PHIL		1.2 NAME		
STREET ADDRESS	9960 NW 116 WAY SUITE 4		1.3 STREET ADDRESS	3006 Straing Road	
CITY-ST-ZIP	MEDLEY FL		1.4 CITY- ST-ZIP		
TITLE	PDT	☐ DELETE	2.1 TITLE	Change ☐ Addition	
NAME	DAVIDSON, JOHN		2.2 NAME		
STREET ADDRESS	AAAA NAMA AAA MAANA ALIITE WA	,	2.3 STREET ADDRESS	3006strling Road	
*CITY-ST-ZIP	MEDLEY FL		2 4 CITY-ST-ZIP	Hollywood, Fr 33021	
TITLE	VDS	☐ DELETE	3.1 TITLE	Change Addition	
NAME	BRADLEY, DAN		3.2 NAME	BRADLEY, DAN LAY #4 3006 Stinling Rod	
STREET ADDRESS	9960 NW 116 WAY SUITE #4	ļ	3.3 STREET ADDRESS	(2 46-2-14-2-14-2-14-2-14-2-14-2-14-2-14-2-	
CITY-ST-ZIP	MEDLEY FL		3.4. CITY- ST- ZIP	MAHT, FL 33178 Hollywood, FL 3302	
TITLE		☐ DELETE	4.1 TITLE	\$\text{\$\text{Change}\$ \ \text{\$\exititt{\$\text{\$\exititte{\$\text{\$\}}}}}}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\e	
NAME		·	4. 2 NAME	RAY BATTANI	
STREET ADDRE 3S			4.3 STREET ADDRESS	3006 STILKLING	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	HOLYWCOD, FL	
TITLE		☐ DELETE	5.1 TITLE	Change Change Addition	
NAME		•	5.2 NAME	DENNIS EXAKE WAY #4 3:00 Sturling Room PAGE NW 1164 WAY #4 3:00 Sturling Room PAGE NAME OF THE PAGE OF	
STREET ADDRESS			5.3 STREET ADDRESS	22176 Hollywood FL 33021	
CITY-ST-ZIP		□ BC: ETC	6.1 TITLE	Change Addition	
TITLE		☐ DELETE		C Change Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	<u></u>	

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07 3)(i), Florida Statutes. I further cartify that the information indicated on this annual report or supplemental shiftual report is fibe 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 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, or on an attach nent with an address with a cother like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR FRINTED NAME O