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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

(4)

DOCUMENT # V63652

1. Corporation Name

AMERICAN HEAT-PIPES, INCORPORATED

		Mailing Address 6914 E. FOWLER AVE. STE E TAMPA FL 33617-1705 US		·····		
00		••			3. Date Incorporated or Qualified 09/14/1992	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 2a. Mailing Address 25					4. FEI Number 59-3175988	Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	Not Applicable \$8.75 Additional
27 27 City & State City & State City & State			···			Fee Required
City & State City & State 28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zφ	Country	Zip	Cou	ntry	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30			Yes No
DEA	9. Name and Address of Cur	rent Hegistered Agent		81 Name	10. Name and Address of New R	egistered Agent
BECKWITH, WILLIAM R. 802 E. LEXINGTON ST.				14aiile		
LAKELAND FL 33801				82 Street Address (P.O. Box Number is Not Acceptable)		
				83		
			}	84 City		85 Zip Code
11 Dun (s)	to the previous of Sections 507 (DEDO and COT 1500 Etarida Ctat.	tos the et	J name	d corporation submits this statement for the	FL 65 Exp code
office or r	registered agent, or both, in the St	ate of Florida. Such change was	authorized	by the cor	poration's board of directors. I hereby acce	purpose of changing its registered ppt the appointment as registered
	am familiar with, and accept the ob			ntes.	S 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	107
SIGNATURE	Signature, typed or printed name of registered	agent and little of applicable preside	TE: Registered	Agent signatur	e required when reinstating)	DATE
12.	To	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE			1.1 717	LE		Change Addition
NAME	BECKWITH, WILLIAM ROBER	(1	1.2 NAME			į
STREET ADORESS	802 E. LEXINGTON ST.		1.3 STREET ADDRESS			
CHTY-ST-ZIF	P			Y-ST-ZIP	1	Change Addition
NAME	KHANH, DINH	Dottett	2.1 TIT 22 NA		DINH, KHANH	ESI Charige L.J Abbitoti
STREET ADDRESS	P.O. BOX 999		a di di	reet adoress	1	
CITY - ST- ZIP	ALACHUA FL			TY-ST-ZIP		
TITLE	D	DELETE	3.1 TiT			Change Addition
NAME	GIANG, DINH		3.2 NA	ME	DINH , GIANG	
STREET ADORESS	P.O. BOX 999		3.3 ST	REET ADDRESS	1	
CHY-ST-ZIP	ALACHUA FL	The res		TY - ST - ZIP		T Character Labor
TITLE	D Holton, Joseph	☐ DELETE	4.1 717			Change L Addition
NAME STREET ACCURESS	2351 SW 27TH AVE.		4 2 N/			
CHY-S1-ZIP	GAINESVILLE FL			REET ADORESS Y+ST-ZIP		
HILE		DELETE	5.1 117			Change Addition
NAME			5.2 NA	ME		- "
STREET ADDRESS			5.3 ST	REET ADDRESS	}	
CITY - ST - ZIP			5.4 CIT	Y • ST - ZIP	<u> </u>	
†-TLF		DELETE	6.1 111	LE		Change Addition
NAME			62 NA	ME		
STREET ADDRESS			6.3 \$71	REET ADDRESS		Í

14. I do 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 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 attachment with an address.

SIGNATURE:

WILLIAM BECCHOTTE STORMS OFFICER OF DIRECTOR

WILLIAM BECKWITH

4/24/97 (813)899 4415

FILED

May 02 1997 8:00am

Secretary of State

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