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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CITY-ST-7P

SIGNATURE:

SIGNATURE AND TYPED OF

DOCUMENT # **V64377**

(7)

CONSERV ENERGY TECHNOLOGIES, INC.

Principal Place of Business Mailing Address 7301 W PALMÉTTO PARK RD STE 301 7301 A W PALMETTO PARK RD SUITE 305C DEEFJELD BEACH FL 33441 BOCA RATOM FL \$3433-3458 3. Date Incorporated or Qualified 3a. Date of Last Report 09/16/1992 02/08/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For FAIRWAY DRIVE 65-0362948 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. # \$8.75 Additional 5. Certificate of Status Desired 22 SUITE 304 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Deerfield Benul Added to Fees 28 Trust Fund Contribution Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 FILINGS, INC SCHNEIDER SANFORD 3732 NW 16TH ST Street Address (P.O. Box Number is Not Acceptable) 82 FT LAUDERDALE FL 33311 CASA DEL 83 BO CA 64 Zip Code 3343 RATON couns 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered count the obligations of, Section 607.0505. Florida Statutes. 11. Pursuant to the provisions of office or registered agent, of agent. I am familiar w SIGNATURE CA CAMPA SOURCE TO COMPANY OF A CAMPA Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE TITLE 1.1 TITLE Addition E034 NAME SCHNEIDER, SANFORD 1.2 NAME 8310 CASA DEL LAGO 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 2.1 TITLE SCHNEIDER, SUSAN NAME 22 NAME 8310 CASA DEL LAGO 2.3 STREET ADDRESS STREET ADORESS **BOCA RATON FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TOTAL MONTAGO, JOSEPH NAME 3.2 NAME 114 LAKE EMERALD DRIVE #204 3.3 STREET ADDRESS STREET ADDRESS OAKLAND PARK FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE NAM-52 NAME STREET ADDRESS **53 STREET ADDRESS** 54 City-ST-ZIP CITY - ST - ZIP ___ DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 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 supplied ental 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 coeiver 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 an an another than address.

OFFICER OR DIRECTOR