

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P22189**  
1. Entity Name  
**GEA INTEGRATED COOLING TECHNOLOGIES, INC.**



Principal Place of Business <b>143 UNION BOULEVARD STE 400 LAKEWOOD, CO 80228 US</b>	Mailing Address <b>143 UNION BOULEVARD STE 400 LAKEWOOD, CO 80228 US</b>
---	---



01122004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>51-0268494</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HEBERT, RICHARD 143 UNION BLVD #400 LAKEWOOD, CO 80228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, PETER 143 UNION BLVD. SUITE 4000 LAKEWOOD, CO 80228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WERGES, CYNTHIA J 143 UNION BLVD #400 LAKEWOOD, CO 80228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILBERMANN, GEORGE DORSTENER STRASSE 484 BOCHUM GERMANY, GR D-4488
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHILDMANN, ROLF DORSTENER STRASSE 484 BOCHUM GERMANY, GR D-4488
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000010498  
01/22/04-80034-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Cynthia J. Werges* **Cynthia J. Werges, CFO** 1/16/04 (303) 907-4058  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #