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**Apr 08 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P22189 (5)
 1. Corporation Name
THERMAL-DYNAMIC TOWERS, INC.



Principal Place of Business 143 UNION BOULEVARD STE 400 LAKEWOOD CO 80228 US	Mailing Address 143 UNION BOULEVARD STE 400 LAKEWOOD CO 80228-1827 US
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3. Date Incorporated or Qualified 12/20/1988	3a. Date of Last Report 03/06/1996
4. FEI Number 51-0268494	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
25 Country	30 Country

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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 accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD GLASSEN, THOMAS J.H.	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2873 CORTINA LANE	1.2 NAME	
STREET ADDRESS	EVERGREEN CO	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	S HORN, CHRISTIE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5355 MIRA SORRENTO PLACE	2.2 NAME	
STREET ADDRESS	SAN DIEGO CA	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D HOFFMEISTER, GERALD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5355 MIRA SORRENTO PL	3.2 NAME	
STREET ADDRESS	SAN DIEGO CA	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D KOCH, HERBERT	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	143 UNION BOULEVARD #400	4.2 NAME	Director
STREET ADDRESS	LAKEWOOD CO	4.3 STREET ADDRESS	Rolf Schildmann
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Dorstener Strabr 484
TITLE		5.1 TITLE	D-44809 Bochum Germany
NAME		5.2 NAME	Thomas J.H. Glasen
STREET ADDRESS		5.3 STREET ADDRESS	2873 Cortina Lane
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Evergreen, Colorado
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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: *Thomas J.H. Glasen* **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 3/31/97 Daytime Phone #: 305 987 0125

CR2E034 (9/96)