Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90088 005 \*\*\*158.75

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	NEIN 1 # 448/46 ECTRIC, INC.						
Principal Place of Business Mailing Address					T CORACT MINITED TO SELECT THE STREET OF STREE	MI	16865 E1810 1881
8456 NW 61 ST MIAMI FL 33166		8456 NW 61 ST MIAMI FL 33166		DO NOT WRITE IN THIS	SPACE		
us us					3. Date Incorporated or Qualifed		
					05/20/1974		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
- · · · · · · · · · · · · · · · · · · ·					59-1532353	<del> </del>	t Applicable
25     26						\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee Re	quired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	28		Trust Fund Contribution Added to Fees		
Zip	Zip Country Zip						□No
	9. Name and Address of Currer	ıt Registered Agent			10. Name and Address of New Registered A	gent	
			81	Name			ļ
WADDLE, ROBERT			82	Street Ac	eet Address (P.O. Box Number is Not Acceptable)		
	S.W. 14TH ST						
MIAN	II FL 33174		83				
			84	City	FL		Code
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation	of Florida. Such change was auti- ations of, Section 607.0505, Florid nt and title if applicable. (NOTE: Re	horized by la Statutes.	tne corpora	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoint		
12.		AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AN	☐ Change	Addition
TITLE	PD	1				☐ Change	
NAME	WADDLE, HODEH O.		1.2 NAME	4000000			
STREET ADDRESS	5/10 5.44: F1111 5111EE1		1.3 STREET				
CITY-ST-ZIP			1.4 CITY-ST 2.1 TITLE	-217		Change	[ ] Addition
TITLE			2.2 NAME			_ '	_ ]
NAME	BOWLING, OFICIAL		2.3 STREET	ADDRESS			]
STREET ADDRESS	TOOCO O.T. FOILD TVEITOE		2.4 CITY-S		-		}
CITY-ST-ZIP TITLE			3.1 TITLE	- 21		Change	☐ Addition
NAME		3.2 N					
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP	34.6		3.4. CITY-S	T-ZIP		_	
TITLE		DELETE 4.1				Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	r-ZIP			
TITLE			5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS	RE33		5.3 STREET				
CITY-ST-ZIP			5.4 CITY-S1	1-ZIP		Change	☐ Addition
TITLE		☐ DELETE	6.1 TITLE			☐ Change	
NAME			6.2 NAME	ADDDESS			
STREET ADDRESS			6.3 STREET	1			
CITY-ST-ZIP			6.4 CITY-S	r-ZIP			

CITY-ST-ZIP 14. 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 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 attactment with an address, with all other like empowered.

SIGNATURE: