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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # **G78871**

(2)

1. Corporation Name ATLAS ELECTRIC, INC. Principal Place of Business 5707 COVE DRIVE ORLANDO FL 32812 ORLANDO FL 32812					* • • • • • • • • • • • • • • • • • • •								
US	. 92412		US	•					orated or Quali	fied 3	3a. Date o		,
									/1984		0	5/24/19	95
2. Principal Plac	e of Business	}1	Mailing Address					4. FEI Numbe				1	Applied For
1	ale	26	Suite, Apt. #, etc.					28.5	2364300				lot Apolicable
Suite, Apt. #,	etc.	27	Soile, Apr. #, etc.					5. Certificate	of Status Desire	d [7	Additional Required
City & State		⊢ -−	City & State						mpaign Financi	ng r	¬		May Be
3		28	· · · · · · · · · · · · · · · · · · ·						Contribution				to Fees
Zip T	Country	h	Zip	30	untry			This corpor Florida Stat	ration has liabilit	y for inta] Yes [cunder s	199.032,
4	25 9. Name and Address of Cur	29 rent Registe	ered Agent	[30]	τ				Address of N			pent	
	•				81	Nan	 16	10.					
FARIEY	, STEPHEN R					0.		/D.O. Pay Nue	wher is Not Ass	antable\			
5707 CC					82	Stre	et Addre	ess (P.O. Box Nun	HIDELIS NOT ACC	eptablej			
	OO FL 32812				83								
					84	City					FL	B5 Zip	Code
Pursuant to	the provisions of Sections 607.0	502 and 607.	1508, Florida Stati	utes, the ab	Jl ove n	named	corpora	ation submits this	statement for th	ne purpos	se of char	nging its r	egistered office
SIGNATURE	the provisions of Sections 607.0 d agent, or both, in the State of F , and accept the obligations of, S grature, typed or profiled name of registered.	agent and life if app	plicable (I	NOTE Registers				when reinstating)			DATE		
SIGNATURE SI	gnature, typed or printed name of registered		plicable (1	NOTE: Registere	d Agent			when reinstating)	statement for the preby accept the S/CHANGES TO		DATE RS AND I	DIRECTO	RS IN 12
SIGNATURE SI	gnature, typed or preted name of registered. OFFICERS	agent and life if app	plicable (I	NOTE: Registere 13.	d Agent			when reinstating)			DATE RS AND I		
SIGNATURE SI 12. TITLE NAME	grature, typed or prefed name of registered. OFFICERS P FARLEY, STEPHEN R.	agent and life if app	plicable (1	NOTE: Registere 13. 1.1	d Agent TITLE IAME	it s-gnati	ire required	when reinstating)			DATE RS AND I	DIRECTO	RS IN 12
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SIGNATURE: STEPHEN R. FARLEY

05/10/96 (40 Day)

(407)859-2158