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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **L58393**

1. Corporation Name

MR. ELECTRIC & ASSOCIATES, INC.

Principal P ace	e of Business	Mailing Address			i 31411 Bibli Bibli B	0(1 01011 10 <i>0</i> 1
920 N.W. FIRST	r st	920 N.W. FIRST ST.				
		FT. LAUDERDALE FL 33311				
		•		DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualifed		
2 Dringing Di	face of Business	2a. Mailing Address		03/19/1990 4. FEI Number	Anr	lied For
—	ace of Busiliess	<u> </u>		65-0181735	├	Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 A	
22	A, 010.	27		5. Certificate of Status Desired	Fee Re	
City & 5 tate		City & State		6. Election Campaign Financing S5.00 May Be		
23		28		Trust Fund Contribution	Added to	. ,
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
24	25	29	30	Personal Property Tax.	Yes	□No
	9. Name and Adcress of Curre	ent Registered Agent		10. Name and Address of New Registere	d Agent	
	DARY MEN		81 Name			
KOTRADY, KEN			82 Street Add	dress (P.O. Bo). Number is Not Acceptable)		
	N.W. 1ST ST					
F∤. L	LAUDERDALE FL 33311		83			
			84 City		. 85 Zip C	ode
				_	L '	_
office or re agent. I at SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered as	e cf Florida. Such change was au gat ons of, Section 607.0505, Flori	thorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the apparent when reinstating DATE	pointment as reg	istered
12.	<u> </u>	ANI) DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	DPS	☐ DELETE	1.1 TITLE		☐ Change	Addition
NAME	KOTRADY, KEN J.		12 NAME			
STREET ADDRESS	11841 TARA DR		1,3 STREET ADDRESS			
CITY-ST-ZIP	PLANTATION FL		1 4 CITY-ST-ZIP			
TITLE	DVT	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME	SMITH, WILLIAM J.		2.2 NAME			
STREET ADDRESS	2623 N.W. 9 TERR.		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		2, 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CfTY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition

14. I heret y 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 changes, or on an attachment with an address, with all other like empowered.

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS