

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

FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P03352 (2)**  
 1. Corporation Name  
**HOUSTON STAFFORD ELECTRIC, INC.**



Principal Place of Business <b>10203 MULA CIRCLE                  P.O. BOX 947                  STAFFORD TX 77487-7947</b>	Mailing Address <b>10203 MULA CIRCLE                  P.O. BOX 947                  STAFFORD TX 77487-7947</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>09/11/1984</b>	
2. Principal Place of Business	2a. Mailing Address
4. FEI Number <b>74-1774028</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>CT CORPORATION SYSTEM                  1200 S. PINE ISLAND ROAD                  PLANTATION FL 33324</b>				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City	<b>FL</b>	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PTD</b>	NAME <b>BROWN, ROY D.</b>	1.1 TITLE <b>AVP MASTER ELECTRICIAN</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS <b>3519 W CREEK CLUB</b>	CITY-ST-ZIP <b>MISSOURI CITY TX</b>	1.2 NAME <b>SAFETY DIRECTOR</b>	
		1.3 STREET ADDRESS <b>WILLIAM B. CRIST</b>	
		1.4 CITY-ST-ZIP <b>577 TRIANON HOUSTON, TX. 77024</b>	
TITLE <b>EVP</b>	NAME <b>MUELLER, BEN L.</b>	2.1 TITLE <b>AT</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS <b>1103 MEADOWLARK LANE</b>	CITY-ST-ZIP <b>SUGAR LAND TX</b>	2.2 NAME <b>JIM P. WISE</b>	
		2.3 STREET ADDRESS <b>3419 BANBURY PLACE</b>	
		2.4 CITY-ST-ZIP <b>HOUSTON, TX. 77027</b>	
TITLE <b>EVP</b>	NAME <b>WAGNER, JOHN S</b>	3.1 TITLE <b>AS</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>3831 PLEASANT VALLEY</b>	CITY-ST-ZIP <b>MISSOURI CITY TX</b>	3.2 NAME <b>JOHN WOMBELL</b>	
		3.3 STREET ADDRESS <b>335 WESTMINSTER DRIVE</b>	
		3.4 CITY-ST-ZIP <b>HOUSTON, TX. 77024</b>	
TITLE <b>VP, T, CFO, S</b>	NAME <b>WILLIAM E. WILKS</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>2426 WEATHERFORD DRIVE</b>	CITY-ST-ZIP <b>PEARLAND, TX. 77584</b>	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE <b>VP, GM</b>	NAME <b>JOHN W. D. PASCHAL, III</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1515 QUIET TRAIL</b>	CITY-ST-ZIP <b>SUGAR LAND, TX. 77479</b>	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE <b>VP, D</b>	NAME <b>JOE POLLOCK</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>518 PINE SHADOWS</b>	CITY-ST-ZIP <b>HOUSTON, TX 77056</b>	6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 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 attachment with an address.

SIGNATURE: *Roy D. Brown* 4/29/98 281-498-2212

CR2E034 (10/97)