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95 MAY -1 PM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000075341 (5)

1. Corporation Name

3 M ELECTRIC, INC.

Principal Place of Business

418 LAKESIDE CIR
SUNRISE FL 33326

Mailing Address

418 LAKESIDE CIR
SUNRISE FL 33326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/13/1994

3a. Date of Last Report

4. FEI Number

65-0525083

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

CARO, JOSEPH L
418 LAKESIDE CIR
SUNRISE FL 33326

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

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

Signature of agent or printed name of registered agent and title (if applicable)

(If title Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CARO, JOSEPH L
STREET ADDRESS 418 LAKESIDE CIR
CITY ST ZIP SUNRISE FL 33326

TITLE D
NAME CARO, MARTHA B
STREET ADDRESS 418 LAKESIDE CIR
CITY ST ZIP SUNRISE FL 33326

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/D ☒ Change ☒ Addition
1.2 NAME MATTHEW J. CARO
1.3 STREET ADDRESS 418 LAKESIDE CIRCLE
1.4 CITY ST ZIP SUNRISE, FL 33326

2.1 TITLE VICE - PRESIDENT/D ☒ Change ☐ Addition
2.2 NAME JOSEPH L. CARO
2.3 STREET ADDRESS 418 LAKESIDE CIRCLE
2.4 CITY ST ZIP SUNRISE, FL 33326

3.1 TITLE SECRETARY/D ☒ Change ☐ Addition
3.2 NAME MARTHA B. CARO
3.3 STREET ADDRESS 418 LAKESIDE CIRCLE
3.4 CITY ST ZIP SUNRISE, FL 33326

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Marta B. Caro MARTHA B. CARO

5/1/95

305-581-5700