

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 1:14
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000090906 (6)

1. Corporation Name
C.B.S. ELECTRIC, INC.

Principal Place of Business Mailing Address
2665 S BAYSHORE DRIVE 2665 S BAYSHORE DRIVE
SUITE M-103 SUITE M-103
COCONUT GROVE FL 33133 COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/14/1994
3a. Date of Last Report
4. FEI Number 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

2. Principal Place of Business 2a. Mailing Address
21 10696 S.W. 79th Terrace 26 10696 S.W. 79th Terrace
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 Miami, Florida 28 Miami, Florida
24 33173 25 U.S.A. 29 33173 30 U.S.A.

9. Name and Address of Current Registered Agent
CAVALLARO, CHARLIE
2665 S BAYSHORE DRIVE
SUITE M-103
COCONUT GROVE FL 33133
10. Name and Address of New Registered Agent
81 Name Charles Cavallaro
82 Street Address (P.O. Box Number is Not Acceptable)
10696 S.W. 79th Terrace
83
84 City Miami FL 85 Zip Code 33173

11. Pursuant to the provisions of Sections 607.0503 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 *Charles Cavallaro* Charles Cavallaro, Vice-President 4/14/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	CAVALLARO, CHARLIE 2665 S BAYSHORE DRIVE SUITE M-103 COCONUT GROVE FL 33133	1 TITLE D/VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME Charles Cavallaro	
STREET ADDRESS		13 STREET ADDRESS 10696 S.W. 79th Terrace	
CITY, ST, ZIP		14 CITY, ST, ZIP Miami, FL 33173	
TITLE		21 TITLE D/P/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME Sharon K. Cavallaro	
STREET ADDRESS		23 STREET ADDRESS 10696 S.W. 79th Terrace	
CITY, ST, ZIP		24 CITY, ST, ZIP Miami, FL 33173	
TITLE		31 TITLE D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME Edward Bolin	
STREET ADDRESS		33 STREET ADDRESS 11010 S.W. 62 Terrace	
CITY, ST, ZIP		34 CITY, ST, ZIP Miami, FL 33173	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exception stated in Section 119.07(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. I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this filing, or on an addendum thereto.

SIGNATURE: *Charles Cavallaro* 4/14/95 279-6947
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR