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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

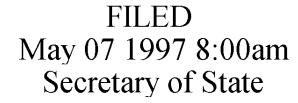
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600096486 (1)

PHOENIX ELECTRIC ENTERPRISES INC.

Principal Place of Business

Mailing Address



	<b>   </b>

2373 SW ANTIO PORT ST LUCIE		2373 SW ANTIQUERA ST PORT ST LUCIE FL 3495				
				3. Date incorporated or Qualified 11/21/1996	3a. Date of Last Report	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0712241	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27	***	<b>0.</b>	Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	1	Trust Fund Contribution	Added to Fees	
Zip	Country	Ziμ	Country	8. This corporation has liability for it		
24	25 29 30 30 9. Name and Address of Current Registered Agent			Florida Statutes Yes LANo		
		telit Hegistered Agent	81 Name	10, Name and Address of New Ites	Jistolou Agom	
	RADE, FRAN		AA	DRADE FRAN ddress (P.O. Box Number is Not Acceptab	/K	
	SW ANTIQUERA ST		82 Street Ad	ddress (P.O. Box Number is Not Acceptab	ie)	
POR	T ST LUCIE FL 34953		83			
			84 City		FL 85 Zip Code	
	to the manifeless of Continue CO7 C	200 207 4500 fleride Cleb	des the characteristic	expectation or through this statement for the p		
office or a	registered agent or both, in the Sta	ate of Florida. Such change was	s authorized by the corno	orporation submits this statement for the paration's board of directors. I hereby accept	t the appointment as registered	
agent. I a	am familiar with, and accept the ob	ligations of, Section 607.0505, F	Florida Statutes.		1	
SIGNATURE	<del></del>	·		2-7. 4. 4.1 (1.2-2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	DATE	
40	Signature, typed or printed name of registered	AND DIRECTORS	Off : Registered Agent signature to	ADDITIONS/CHANGES TO OFFIC	······································	
12.	I PSD	DELETE	13.	ADDITIONS/OFFAINGES TO OFFIC	Change Addition	
NAME	ANDRADE, FRANK		1.2 NAME			
	2373 SW ANTIQUERA ST.		1.3 STREET ADDRESS			
STREET ADDRESS	BOOK OF LUCIE PLANTED		•			
CITY-ST-ZIP TITLE	TDD	DELETE	14 CAY-S1-7IP 21 TITLE	<b>+</b> 0.0	Change Addition	
	MCKENZIE, BARBARA A		2.2 NAME			
NAME	2373 SW ANTIQUERA ST.		S ≪ CANACA PERCENCE	ANDRADE, BARBARA A 2373 SW ANTIQUERA ST. PORT ST LUCIE FI 34953		
	PORT ST LUCIE FL 34953		2.3 STREET ADDRESS	2373 SW ANTIQUERA ST.		
CITY-ST-ZIP	FUNI SI LUCIE FL 34855		2 4 CITY - ST - 7 IP			
TITLE		VELETE	2 1 TITLE	PORT ST LUCIE FI	34953 Change Addition	
A S A A A A C		DELETE	3.1 TITLE	PORT ST LUCIE FI	34953	
NAME		DELETE	3.1 TITLE 3.2 NAME	PORT ST LUCIE FI	34953 Change Addition	
STREET ADDRESS		DELETE	3.3 TITLE 3.2 NAME 3.3 STREET ADDRESS	PORT ST LUCIE FI	34953 Change Addition	
STREET ADDRESS CHTY-ST-ZIP			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP	PORT ST LUCIE FI	Change Addition	
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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.