## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 26, 2002 8:00 am DOCUMENT # P99000072014 **Secretary of State** 1. Entity Name 02-26-2002 90132 032 \*\*\*150 00 4B ELECTRIC, INC. Principal Place of Business Mailing Address 1521 NORTH 73RD AVENUE 1521 NORTH 73RD AVENUE UUUJAUAU HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 2. Principat Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0942298 ✓ Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FORBEY, BRENDA C Street Address (P.O. Box Number is Not Acceptable) 1521 NORTH 73RD AVENUE HOLLYWOOD FL 33024 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE PSTD ☐ Addition CR2E034 (9/01 ☐ Delete TITLE FORBEY, BRENDA C NAME NAME STREET ADDRESS 1521 NORTH 73RD AVENUE STREET ADDRESS HOLLYWOOD FL 33024 CITY-ST-ZIP CITY-ST-ZIP VD ---☐ Addition ☐ Delete TITLE: Change FORBEY, DONALD NAME 1521 NORTH 73RD AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33024 CITY-ST-ZIP D ☐ Delete ☐ Change ■ Addition TITLE TITLE FORBEY, KYLEN NAME STREET ADDRESS 1521 NORTH 73RD AVENUE STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33024 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE Change ☐ Addition NAME NAME

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP