## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATIO ANNUAL REPO <b>1996</b>	- 「海海 Wine」 オノデ	Sandra B Secretar	TMENT OF STATE I. Mortham I'y of State CORPORATIONS
DOCUMENT 1. Corporation Name	# F91670	(2)	
3-D ELECTRICAL	. INC.		
Principal Place of Business		Mailing Address	***************************************
8533 NW 247H CT CORAL SPRINGS FL 33065	•	8533 NW 24TH CT CORAL SPRINGS FL 3306	55
Principal Place of Busin     1	ess	2a. Mailing Address	
Suite, Apt #, etc		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



CORAL SPRINGS FL 33065		BS33 NW 24TH C1 CORAL SPRINGS FL 33065							
				3. Date Incorporated or Qualified 07/20/1982	3a. Date of Last Report 05/01/1995				
2. Principal Place of Business 2a. Mailing Address 2b		4. FEI Number 59-2217081			ed For applicable				
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>8.75</b> Add Fee Requ		
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip 24	Country 25	Zip 29	Gount 30	ry	8. This corporation has liability for in Florida Statutes	ntangible tax   Yes     1		9 032	
	9. Name and Address of Current	nt Registered Agent			10. Name and Address of New Reg	stered Age	nt		
SKI	LAREW, JAY		8	1 Name					
853	33 NW 24TH CT		8	2 Street Add	dress (P.O. Box Number is Not Acceptabl	e)			
CO	PRAL SPRINGS FL 33065		8	3	THE RESIDENCE OF THE PROPERTY				
			8	4 City		Fi <sup>5</sup>	35 Zip Cod	de de	
SIGNATURE	Signature, typed or printed runne of registered age OFFICERS AN	n tand title Lapplicable (fv ID DIRECTORS	.OTE Projectened A	gent signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTORS II	N 12	
TITLE	PTD	DELETE	1 1 TITLE		1,001110110/011111000110 0/110	T	Change	Addition	
NAME	SKLAREW, JAY		1 2 NAMI			L	L	1	
STREET ADDRESS	8533 NW 24TH CT		I.	ET ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CHY						
THILE	VS	DELETE	2.1 THILE		· · · · · · · · · · · · · · · · · · ·	T	Change	Addition	
NAME	SKLAREW, JOYCE		2.2 NAMI			النبط	endings	, riadition	
STREET ADDRESS	1060 SW 51ST AVENUE			ET ADDRESS					
CITY-ST-ZIP	PLANTATION FL		2 4 C:TY	1					
TITLE		DELETE	3 1 TITLE				Change	Addition	
NAME		-	3.2 NAME	[	••		<del></del>		
STREET ADDRESS			33STRE	ET ADDRESS					
CITY - ST - ZiP			3.4. CITY	- ST - Z1P					
TITLE		DELETE	4 t TITLE				Change	Addition	
NAME			4 2 NAV	ŧ					
STREET ADDRESS			4 3 STRE	ET ADDRESS					
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CHTY-						
THTLE		DELETE	5 1 TITLE				Change	Addition	
NAMÉ			5.2 NAME						
STREET ADORESS			5.3 STRE	ET ADDRESS					
CITY-S1-ZIP			5.4 CITY						
THRE		☐ DEFEIE	6.1 TITLE	ļ			Change	Additio	
NAMÉ			6.2 NAME						
STREET ADDRESS			63 STRE	ET ADORESS					
CITY-ST-ZIP			6.4 CITY -	ST-ZIP					
da lala basab	and the state of t	1 11 44 1 124 1 1 1 1 1 1 1 1 1 1 1 1 1			-17 1 11 0 11 0	16. 6.7(6)(1			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes 1 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 cath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13.4 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR