

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Kathorine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOCOCOMOSEO

1. Corporation Name ARM ELECTRICAL SERVICES (N						
Principal Place of Business	Malling Address			((A CHINE) HE LONG (DES) GRAS AND DE	14) MEBIT - 64 67 611 6	Millian Inter
10138 NW 32 ST	10138 NW 32 ST				•	
SUNRISE FL 33351 SUNRISE FL 33351				DO NOT WRITE IN TH	IC CDACE	
				3. Date Incorporated or Qualified	IS SPACE	
				05/04/1998		
2. Principal Place of Business	2a. Mailing Address			4 FEI Number	- A	polied For
2. Principal Place of dustriess 22. Williams 7.23.				65-0841562		ot Applicable
Suite, Apt. #, etc.	Suite, Apt, #, etc.					Additional
2	27			5. Certificate of Status Desired	Fee,Re	equired
City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
3	28					to Fees
Zip Country	Zip	Co	untry	8. This corporation owes the current year		
4 25	29	30		Personal Property Tax.	Yes	-□No
9. Name and Address of C	urrent Registered Agent			10. Name and Address of New Registere	d Agent	
			81 Name			
MATOVICH, ANDREW 10138 NW 32 ST			82 Street Add	ess (P.O. Box Number is Not Acceptable)		
			00007			
SUNRISE FL 33351			83			
					85 Zip	Code
			84 City	F		COLIE
SIGNATURE Signature, typed of printed name of register	red agent and title If applicable (NO	TE: Registere	d Agent signature requir	poration submits this statement for the purpose upon's board of directors. I hereby accept the appropriate (approximately accept the approximately accept the approximately accept the approximately accept the approximately accept the accept the approximately accept the accept		
: 	RS AND DIRECTORS	13.				
me President			 	ADDITIONS/CHANGES TO OFFICERS		
ME Andrew Martou		1.1 7	mLE		AND DIRECTO	RS IN 12
1 111 / 11 / 00	ch	1.1 T 1.2 N	AME			
STREET ADDRESS 10138 NW 32 S	ch treet	1.1 T 1.2 N 1.3 S	IAME STREET ADORESS			
STREET ADDRESS 10138 NW 32 STOTY ST. ZP SUNCISC FU	ch +1ce t 33351	1.1 T 1.2 N 1.3 S 14 C	HAME STREET ADORESS STY-ST-ZIP		Change	Addition
STREET ADDRESS 10138 NW 32 STATES SUNCISE FU	ch treet	1.1 T 1.2 N 1.3 \$ 14 C	TREET ADDRESS OTY-ST-ZIP			
TREETADORESS 10138 NW 32 STATES SUNCISC FU	Ch +1ce t 33351 □ DELETE	1.1 T 1.2 N 1.3 \$ 14 C	HAME STREET ADORESS STY-ST-ZIP		Change	Addition
TREET ADDRESS 10138 NW 32 STATE SUNCISC FU	Ch +1ce t 33351 □ DELETE	1.1 T 1.2 N 1.3 S 14 C 2.1 T 2.2 N	TREET ADDRESS OTY-ST-ZIP		Change	Addition
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STREET ADDRESS 10138 NW 32 STREET ADDRESS 10138	ch ticet 33351 DOELETE	1.1T 12N 1.3S 14C 2.1T 22N 2.3S 2.4G 3.1T	STREET ADDRESS STY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE		Change	Addition
STREET ADDRESS 10138 NW 32 STREET ADDRESS SUNCISC FU STREET ADDRESS 10138 NW 32 STREET ADDRESS 10138 N	Ch +1ce t 33351 DOLLETE Ch Street	1.1T 1.2N 1.3S 1.4C 2.1T 2.2N 2.3S 2.44 3.1T	HAME STREET ADDRESS SITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME		Change	Addition
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STREET ADDRESS 10138 NW 32 STATE SUNTISE FU TITLE SCCRETCITY NAME HAZEL MA TOUCH STREET ADDRESS 10138 NW 32	Ch t/cet 33357	1.1T 12N 13S 14C 21T 22N 23S 2.44 31T 32N 33S 34.C 4.1T 4.2P 43S 44C 51T 52N 53S	MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS STY-ST-ZIP		Change	Addition Addition

14. I hereby certify that the information supplied with this filing does not qualify for the contract on this annuel 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90029 041 ***150.00