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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 146944

(4)

FIFE/FI	LORIDA ELECTRIC SUPP	PLY, INC.			ANI ANNI ANNI ANNI ANNI ANNI ANNI
Principal Piac	ce of Business	Mailing Address			PBH BUDH BUBH BUBH BUBH BUBH BUBH
5408 N 59 ST. 5406 N 59 ST. P O BOX 310308 P O BOX 310308 TAMPA FLORIDA 33880-7308 TAMPA FLORIDA			08	DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
A Origonal F	Nana of Dunisana	La Malla Address		05/08/1946	
1	Place of Business	2a. Mailing Address	815 6 1366	4. FEI Number	Applied For
21 (030) Suite, Apt.	FISHER AU	26 Pb Bby Suite, Apt. #, etc.	210	59-0549071	Not Applicable
22	. w, G (O.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		• Fination Companies Financias	<u> </u>
23 TAMP		28 Branon	ET.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	1 49 - 1	Country	8. This corporation owes or has paid	
24 3361	25 1	1 29 to 336 09	30	Personal Property Tax due June 30	
	g. Name and Address of Cu			10. Name and Address of New Regis	
JEI	FFERSON, NELSON		81 Name		
SAGA NI SOTILIOT			82 Street Addre	ess (P.O. Box Number, is Not Acceptable)	
	MPA FL 33810		(080)	FISHER AV	
			83		
			84 City		Inc. 7: Code
			(B ~	-PA	FL 85 Zip Code 33619
11, Pursuant	to the provisions of Sections 607.	.0502 and 607.1508, Florida Statute	the above named corne	pration submits this statement for the purpon's board of directors. I hereby accept the	anno of changing its registered
agent. I a	im familiar with, and accept the o	bligations of, Section 607.0505, Flor	ida Statutes.	on's board or directors, I nereby accept ti	ne appointment as registered
SIGNATURE	nelson Hay	fus			
	Signature typed or printed name of leaster		Registered Agent signature require		DATE
12.	P	AND DIRLCTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICER	
NAME	*	DELCIE	1.1 Title		Change Addition
STREET ADDRESS	JEFFERSON, NELSON		1.2 NAME		
	2320 S GALLAGHER RD DOVER FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ST	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	WHITWAM, J C				Change Addition
STREET ADDRESS	524 LUCERNE AVE		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL				
TITLE	TAM AT L	[] DELETE	2. 4 C/TY - ST - Z/P 3.1 T/TLF		Change Addition
NAME		End Section	3.2 NAME		C Change Modified
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 1ITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST- ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIFA		

14. 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 annual report or supplemental annual report is true and accurage 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 temport 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.