

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Suzanne B. Matheson  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 169454 (6)**

1. Corporation Name  
**BISCAYNE ELECTRIC AND HARDWARE DISTRIBUTORS, INC**



Principal Place of Business: **1140 NW 159TH DRIVE MIAMI FL 33169**  
Mailing Address: **1140 NW 159TH DRIVE MIAMI FL 33169**

|    |                     |    |
|----|---------------------|----|
| 21 | 2a. Mailing Address | 26 |
| 22 | State, Apt. #, etc. | 27 |
| 23 | City & State        | 28 |
| 24 | Zip                 | 29 |
| 25 | County              | 30 |

|   |  |
|---|--|
| 3. Date Incorporated or Qualified   | 3a. Date of Last Report                                  |
| <b>06/19/1952</b>   | <b>05/01/1995</b>  |
| 4. FID Number   | Applied For  |
| <b>59-0674810</b>   | Not Applicable   |
| 5. Certificate of Status Desired  | <b>\$8.75 Additional Fee Required</b>                    |
| <input type="checkbox"/>  |  |
| 6. Election Campaign Financing Trust Fund Contribution                                | <b>\$5.00 May Be Added to Fees</b>                       |
| <input type="checkbox"/>  |  |
| 8. The corporation has liability for intangible tax under s. 193.032 Florida Statutes | <input type="checkbox"/> Yes <input type="checkbox"/> No |

9. Name and Address of Current Registered Agent  
**SILVERMAN, VICKI  
1140 N.W. 159TH DRIVE  
MIAMI FL 33169**

|    |  |                            |
|----|--|----------------------------|
| 81 | Name   | <b>SPELTON, VICKI</b>      |
| 82 | Street Address (P.O. Box Number is Not Acceptable) | <b>1140 N.W. 159 DRIVE</b> |
| 83 | City   | <b>MIAMI</b>               |
| 84 | State  | <b>FL</b>                  |
| 85 | Zip Code   | <b>33169</b>               |

11. Pursuant to the provisions of Sections 607.0712 and 607.0713 Florida Statutes, the above named corporation hereby makes this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 607.0713 Florida Statutes.

SIGNATURE: *Vicki Spelton*

| 12. | NAME                | STREET ADDRESS      | CITY-ST-ZIP     | TITLE | OFFICERS AND DIRECTORS                     |
|-----|---------------------|---------------------|-----------------|-------|--|
|     | ST SPELTON, ELEANOR | 1140 N.W. 159TH DR. | MIAMI FL        | VPD   | <input checked="" type="checkbox"/> DELETE |
|     | TROOP, ALAN         | 1140 N W 159TH DR   | MIAMI, FL 00000 | PD    | <input type="checkbox"/> DELETE            |
|     | SPELTON, VICKI      | 1140 N W 159TH DR   | MIAMI, FL 00000 |       | <input type="checkbox"/> DELETE            |
|     |                     |                     |                 |       | <input type="checkbox"/> DELETE            |
|     |                     |                     |                 |       | <input type="checkbox"/> DELETE            |
|     |                     |                     |                 |       | <input type="checkbox"/> DELETE            |

| 13. | NAME             | STREET ADDRESS | CITY-ST-ZIP     | TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                            |
|-----|------------------|----------------|-----------------|-------|--|
|     | S SPELTON, VICKI | 1140 NW 159 DR | MIAMI, FL 33169 |       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
|     |                  |                |                 |       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|     |                  |                |                 |       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
|     |                  |                |                 |       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

14. I do hereby certify that the information furnished herein is true and correct, and that I am not a director, officer, or shareholder of the corporation. I understand that my signature shall have the same legal effect as if made under oath, that any officer or director of the corporation or the president or treasurer 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 in an affidavit filed with an annex.

SIGNATURE: *Vicki Spelton, Pres.* **VICKI SPELTON, PRES. 1/17/96** **1-365-625-8526**

CR2E034 (12/95)