

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

**FILED**  
**May 02 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # 192384 (6)**

1. Corporation Name  
**FLORIDA ELECTRIC SERVICE CO., INC.**



Principal Place of Business <b>1491 S.W. 21ST AVENUE                  FT. LAUDERDALE FL 33312</b>	Mailing Address <b>1491 S.W. 21ST AVENUE                  FT. LAUDERDALE FL 33312-3109</b>
--	---

3. Date Incorporated or Qualified <b>04/14/1956</b>	3a. Date of Last Report <b>05/01/1996</b>
--	--

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

4. FEI Number <b>59-0782017</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**SIEMS, HAROLD KENNETH  
 3011 S.W. 47 ST  
 FORT LAUDERDALE FL 33312**

10. Name and Address of New Registered Agent

81 Name <b>Scott R. Austin, Esq.</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>Houston &amp; Shahady, P.A.</b>
83 <b>100 N.E. Third Ave., Suite 850</b>
84 City <b>Ft. Lauderdale FL</b>
85 Zip Code <b>33301</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Scott R. Austin* **Scott R. Austin, Esq.** **4/25/97**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>SIEMS, STEVEN L</b>	
STREET ADDRESS	<b>4268 SW 70 TERRACE</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> DELETE
NAME	<b>MAICHUK, PAMELA M</b>	
STREET ADDRESS	<b>3011 S W 47 STREET</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE, FL00000</b>	
TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>SIEMS, HAROLD CHESTER</b>	
STREET ADDRESS	<b>4268 SW 70 TERRACE</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>SIEMS, LILLIAN MAY</b>	
STREET ADDRESS	<b>4268 SW 70 TERRACE</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>SIEMS, HAROLD KENNETH</b>	
STREET ADDRESS	<b>3011 S.W. 47TH STREET</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE, FL00000</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 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.

SIGNATURE: *Steven L. Siems* **Steven L. Siems, Director** **April 21 1997** **954-597-6760**  
Signature and typed or printed name of signing officer or director Date Daytime Phone # 0271119

CR2E034 (9/96)