

2001 UNIFORM BUSINESS REPORT (UBR)

AMENDED

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN 20 PM 3:02

DOCUMENT # 192384

1. Entity Name

FLORIDA ELECTRIC SERVICE CO., INC

Principal Place of Business 1491 SW 21ST AVENUE FT LAUDERDALE FL 33312	Mailing Address 1491 SW 21ST AVENUE FT LAUDERDALE FL 33312
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0782017	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SHAHADY, THOMAS R. ESQ. 316 NE 4TH STREET FT LAUDERDALE FL 33301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME SIEMS, STEVEN L. STREET ADDRESS 2412 NASSAU LANE CITY-ST-ZIP FT LAUDERDALE FL 33312	<input type="checkbox"/> Delete	TITLE DST NAME SIEMS, STEVEN L STREET ADDRESS 2412 NASSAU LANE CITY-ST-ZIP FT LAUDERDALE FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME MAICHUK, PAMELA M STREET ADDRESS 3011 SW 47TH STREET CITY-ST-ZIP FT LAUDERDALE FL 33312	<input checked="" type="checkbox"/> Delete	TITLE 300004466793--6 STREET ADDRESS -07/10/01--01021--007 CITY-ST-ZIP *****61.25 *****61.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME SIEMS, HAROLD CHESTER STREET ADDRESS 4268 SW 70 TERRACE CITY-ST-ZIP DAVIE FL	<input type="checkbox"/> Delete	TITLE VD NAME SIEMS, HAROLD CHESTER STREET ADDRESS 1491 SW 21ST AVE CITY-ST-ZIP FT LAUDERDALE FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE B NAME SIEMS, LILLIAN MAY STREET ADDRESS 4268 SW 70 TERRACE CITY-ST-ZIP DAVIE FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PD NAME SIEMS, HAROLD KENNETH STREET ADDRESS 3011 SW 47TH STREET CITY-ST-ZIP FT LAUDERDALE FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Steven L. Siems*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/15/01 (954) 587-6760
Date Daytime Phone

CR2E034 (11/00)