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Apr 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 231689

(1)

1. Corporation Name

BIRDSONG ELECTRIC CO

Principal Place of Business

3270 N W 54 ST
MIAMI FL 33142

Mailing Address

3270 N W 54 ST
MIAMI FL 33142-3308



3. Date Incorporated or Qualified

01/02/1960

3a. Date of Last Report

06/25/1996

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

FRIEDMAN, JOEL
3270 N W 54TH ST
MIAMI FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

VD

NAME

FRIEDMAN, JOEL

STREET ADDRESS

3270 N W 54TH ST

CITY - ST - ZIP

MIAMI FL

TITLE

VD

NAME

FRIEDMAN, MARLA

STREET ADDRESS

3270 N.W. 54TH STREET

CITY - ST - ZIP

MIAMI FL

TITLE

PD

NAME

BROWN, FLORENCE JEAN

STREET ADDRESS

3270 N.W. 54TH ST.

CITY - ST - ZIP

MIAMI FL

TITLE

SD

NAME

BROWN, ROBERT S.

STREET ADDRESS

3270 N.W. 54TH ST.

CITY - ST - ZIP

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

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:

Florence Jean Brown P.S. Brown PRES 3/11/97 (205) 634-5151

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0197352

CR2E034 (9/96)