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Apr 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **249171** (0)

1. Corporation Name
RICHARD ELECTRIC SUPPLY COMPANY, INC.

Principal Place of Business

**7281 NW 8TH STREET
MIAMI FL 33126**

Mailing Address

**7281 NW 8TH STREET
MIAMI FL 33126-2918**



3. Date Incorporated or Qualified **07/10/1961** 3a. Date of Last Report **04/23/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-0934811	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent

**PAZ, JOSE M
7281 N.W. 8TH STREET
MIAMI FL 33126**

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 fee if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11. TITLE	DIRECTOR
NAME	FERNANDEZ, JULIAN, JR.	12. NAME	GLORIA M. FERNANDEZ
STREET ADDRESS	6905 PRADO BLVD	13. STREET ADDRESS	6905 PRADO BLVD
CITY - ST - ZIP	CORAL GABLES FL	14. CITY - ST - ZIP	CORAL GABLES, FL
TITLE	ST	2.1. TITLE	
NAME	ESPALLARGAS, GLADYS	2.2. NAME	
STREET ADDRESS	3120 SW 78TH CT	2.3. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4. CITY - ST - ZIP	
TITLE	D	3.1. TITLE	
NAME	PAZ, JOSE M	3.2. NAME	
STREET ADDRESS	10480 S W 26TH ST	3.3. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	3.4. CITY - ST - ZIP	
TITLE	D	4.1. TITLE	
NAME	LAGE, JUSTINA	4.2. NAME	
STREET ADDRESS	5746 SW 4TH ST	4.3. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	4.4. CITY - ST - ZIP	
TITLE		5.1. TITLE	
NAME		5.2. NAME	
STREET ADDRESS		5.3. STREET ADDRESS	
CITY - ST - ZIP		5.4. CITY - ST - ZIP	
TITLE		6.1. TITLE	
NAME		6.2. NAME	
STREET ADDRESS		6.3. STREET ADDRESS	
CITY - ST - ZIP		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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-97

Date

Daytime Phone #

0182884

CR2E034 (9/96)