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PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Jun 01 1998 8:00am Secretary of State

DOCUMENT #

307822

C B ELECTRIC INDUSTRIES, INC.

Principal Place of Business 1749 SW 4TH STREET FT LAUDERDALE FL 33312 1749 SW 4TH STREET FT LAUDERDALE, FL 33312

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/04/1966 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-1145460 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Yes 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HEATON, PAUL S JR. 82 Street Address (P.O. Box Number is Not Acceptable) 5715 TAFT STREET HOLLYWOOD, FL 33020 83 City 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 diapplicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TO LE NAME 12 NAME HEATON, PAUL S., JR EMOND, DENNIS G. 1550 SW MERCEDES AVE 1.3 STREET ADDRESS STREET ADDRESS 5715 TAFT STREET 1.4 City - ST - ZiP PORT ST. LUCIE, FL 3495 CITY-ST-ZIP HOLLYWOOD, FL 33020 DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition 70000254347 -06/02/98--01011--009 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*7<u>1</u>1.00 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filling 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 altachment with an address.