FILE NOW; FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 307822

C B ELECTRIC INDUSTRIES, INC.

Mailing Address

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90023 047 ***150.00



1 Till Cipal 7 Tabb of Badinoss		•		
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 Qualifed 08/04/1966	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For	
	26		59-1145460 Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	-	5. Certifcate of Status Desired \$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip Country	Zip Co.	untry	8. This corporation owes the current year Intangible Personal Property Tax. Yes No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
		81 Name		
HEATON, PAUL S. JR. 5715 TAFT STREET	•	82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL 33020		83	· · · · · · · · · · · · · · · · · · ·	
!		84 City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	Florida. Such change was authorize	d by the corporation	pration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered	

SIGNATURE	Signature, typed or printed name of registered agent and title if appli	icable (NOTE: F	Registered Agent signature regi	required when reinstating): 50% DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HEATON, PAUL S., JR.		1.2 NAME	
STREET ADDRESS	5715 TAFT STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	EMOND, DENNIS G.		2.2 NAME	
STREET ADDRESS	1550 SW MERCEDES AVE	•	2.3 STREET ADDRESS	
CITY-ST-ZIP	PORT ST LUCIE FL 34953		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLĘ	☐ Change ☐ Addition
NAME : 37 (A)	Bracking of the		3.2 NAME	
STREET ADDRESS	State of the state		3.3 STREET ADDRESS	The first of the second of the
CITY-ST-ZIP		•	3.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·
TITLE		☐ DELETE	4.1 TITLE	☐ Change ! : ☐ Addition
NAME.			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		,	4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	Professional Control of the Control
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE	American Communication (Communication)	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	概念、结果的 。	•	6.2 NAME	
STREET ADDRESS		•	6.3 STREET ADDRESS	
CITY-ST-7IP			6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE