## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 344178

(9)

ZABLOCKI ELECTRIC CO INC

(-

Principal Place of Business

12521 S OAKVIEW AVE FLORAL CITY FL 34436 Mading Address

12521 S OAKVIEW AVE FLORAL CITY FL 34436-4622 FILED Apr 30 1997 8:00am Secretary of State



FLORAL CITY US	FL 34436	FLORAL CITY FL 34436-4622 US						
					3. Date Incorporated or Qualified 04/07/1969	3a, Date 05/01		Report
	lace of Business	2a. Mailing Address			4. FEI Number		P	Applied For
21		26 P.O. BOX 268			59-1266257	<del></del>		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		• -	Additional Required
City & State		City & State  28 FLORAL CITY, FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Country	,	8. This corporation has liability for in	ntangible ta:	c under	s. 199.032
24	25	29 34436-026830	<u>us</u>	<u>A</u>		Yes 🗌		<del></del>
740	9, Name and Address of Currer	nt Registered Agent	81	Marsa	10. Name and Address of New Reg	gistered Ag	ent	
	LOCKI, GORDON K.		e i	Name				
12521 \$ OAKVIEW AVE FLORAL CITY FL 34436			82	82 Street Address (P.O. Box Number is Not Acceptable)				
rLO	TIME OUT PL 39430		83					
			84	City		FL	85 Zip	Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was auth	norized by	the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of ch	langing Iment a	its registered s registered
SIGNATURE	Signature, typed or printed name of registered app		ngistered Age	ont signature requ	uired when reinstating)	DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PD ZABLOCKI, GORDON K	☐ DELETE	1.1 TITLE				] Change	☐ Addition
NAME	12521 S OAKVIEW AVE		1.2 NAME					į
STREET ADDRESS	FLORAL CITY FL		1.3 STREET	- 1				
CITY-ST-ZIP TITLE	VD VD	DELETE	1.4 CITY - S 2.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	ZABLOCKI, KENNETH M	otter	22 NAME	' '		L.	] Unango	ET MODITION
STREET ADDRESS	8040 E. ROOKS RD.		23 STREET	ADDRESS				
CITY-ST-ZIP	FLORAL CITY FL		2 4 DiTY-	1				
TITLE		DELETE	3.1 TITLE	-			Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CHTY - ST - ZIP			3.4. CITY-	SI - 7/P				
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP		Delete	44 CITY-S	I - ZIP		<del></del>	Charac	A 2 400 - 1
TITLE		DELETE	5.1 TITLE	[		_	Change	
NAME OTDECT ADODESS			5.2 NAME	ADDOLGO				
STREET ADORESS			5.3 STREET					
CITY-ST-ZIP TITLE		DELFTE	5.4 CHIY - S 6.1 TULE	ot-ZIP			Change	Addition
NAME		ا الماد ب	G.2 NAME				1 Augustic	
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CHY- S					
UNITED TO	L		0.12011114	· • • · · · · · · · · · · · · · · · · ·				

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 trustice 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.

ONATURE VOTORDON / Zolober i Godon KZalalali 424-97 (352)637-1725