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

Mailing Address

6670-B WHITE DRIVE WEST PALM BEACH FL 33407

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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Zip

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 359377

Country

9. Name and Address of Current Registered Agent

1. Corporation Name

Principal Place of Business

WEST PALM BEACH FL 33407

2. Principal Place of Business

BARRA, RICHARD K

PALM BEACH GARDENS FL 33410

4400 PGA BLVD STE. 800

Suite, Apt. #, etc.

City & State

6670-B WHITE DR

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Zip

R.A.O. ELECTRIC COMPANY

STATE	Feb 17, 1999 8	3:00am				
)NS	Secretary of	State				
	02-17-1999 90094 046 ***158.75					
	r - y					
•						
	DO NOT WRITE IN THIS	SPACE				
	3. Date Incorporated or Qualifed 02/09/1970					
	4: FEI Number	Applied For				
	59-1283661 5. Certificate of Status Desired XX	\$8.75 Additional Fee Required	1.			
	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
	This corporation owes the current year Int Personal Property Tax.	¥ Yes □No				
	10. Name and Address of New Registered	Agent	تت.			
Name	•					
Street Addre	ess (P.O. Box Number is Not Acceptable)					
City	FL	85 Zip Code				
named corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoi	changing its registered ntment as registered				
	•					

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation s office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of the corporation's board of the state of Florida Statutes.

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84 City

Country

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agent. I am ramiliar with, and accept the obligations of, Section 607.0505, Fibrida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)									
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						RS IN 12			
TITLE	VP	☐ DELETE	1.1 TITLE	20,7 18 5 14,	☐ Change	☐ Addition			
NAME	MIRABILIO, RICHARD M		1.2 NAME			-			
STREET ADDRESS	956 LIGHTHOUSE DR		1.3 STREET ADDRESS		X				
CITY-ST-ZIP	NORTH PALM BEACH FL 33408		1.4 CITY-ST-ZIP						
TITLE	PTSD	☐ DELETE	2.1 TITLE		☐ Change	Addition			
NAME	RAO, JOSEPH W.		2.2 NAME			1			
STREET ADDRESS	709 SANDPIPER WAY W		2.3 STREET ADDRESS		*				
CITY-ST-ZIP	N. PALM BEACH FL		2.4 CITY-ST-ZIP						
TITLE	VP	☐ DELETE	3.1 TITLE		Change	☐ Addition			
NAME	ELBRECHT, HERMANN D		3.2 NAME		,				
STREET ADDRESS	4622 S.E. SHADY RIDGE LANE		3.3 STREET ADDRESS	1.00	3116. ** 3 *****	. 5,5, 3,			
CiTY-ST-ZIP	STUART FL 33494		3.4. CITY-ST-ZIP	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<u>。"李俊俊的《美雄篇》</u>				
TITLE		□ DELETE	4.1 TITLE	ومرقسها فالمعاد المرسمونية المناوات والمستهدية المستهدية	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			1			
STREET ADDRESS	,		5.3 STREET ADDRESS			.			
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE	€ a	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition i			
NAME		•	6.2 NAME	1	•				
STREET ADDRESS			6.3 STREET ADDRESS						
CITY-ST-ZIP			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 an analysis of 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 an analysis of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of 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 an analysis of the corporation of th

SIGNATURE:

J&W: RAO_-_PRESIDENT RINTED NAME OF SIGNING OFFICER OR DIRECTOR

(561) 848-4100