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**May 13 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 366980 (1)
1. Corporation Name
CARL'S ELECTRIC, INC.



Principal Place of Business: 1059 SHOTGUN ROAD, SUNRISE FL 33326
Mailing Address: 1059 SHOTGUN ROAD, SUNRISE FL 33326-1911

3. Date Incorporated or Qualified: 07/13/1970
3a. Date of Last Report: 06/11/1996

2. Principal Place of Business: 5140 SW 89 TER, COOPER CITY FLA 33328
2a. Mailing Address: 5140 SW 89 TER, COOPER CITY FL 33328
21. Suite, Apt. #, etc.
22. City & State: COOPER CITY FLA
23. Zip: 33328, Country: USA

4. FEI Number: 59-1301061
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**ANNESTY, DAVID W
1059 SHOTGUN ROAD
FT LAUD, FLA
SUNRISE FL 33326**

10. Name and Address of New Registered Agent
81 Name: ANNESTY, DAVID W.
82 Street Address (P.O. Box Number is Not Acceptable): 5140 SW 89 TER
84 City: COOPER CITY FL 85 Zip Code: 33328

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, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: DAVID W. ANNESTY - PRES. *David W. Anesty* 4/28/97
Signature typed or printed name of registered agent and the date if applicable (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	ANNESTY, DAVID W.	
STREET ADDRESS	1059 SHOTGUN ROAD	
CITY - ST - ZIP	SUNRISE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P.S.D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DAVID W. ANNESTY	
1.3 STREET ADDRESS	5140 SW 89 TER	
1.4 CITY - ST - ZIP	COOPER CITY FL 33328	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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: DAVID W. ANNESTY - PRES. *David W. Anesty* 4/28/97 954.476-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)