

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

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**May 19 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 # 384561 (7)

1. Corporation Name
ATLAS ELECTRIC SUPPLIES OF FLORIDA, INC.

*027515
6/80372*



Principal Place of Business
**1111 W 22ND ST
HIALEAH FL 33010**

Mailing Address
**1111 W 22ND ST
HIALEAH FL 33010-1920**

3. Date Incorporated or Qualified 06/28/1971	3a. Date of Last Report 05/01/1996
4. FEI Number 59-0812272	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent GORDICH, ALAN 1111 NW 22ND ST HIALEAH FL 33010	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	
	85. Zip Code

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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 607.0508, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRES <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDICH, ALAN	1.2 NAME	
STREET ADDRESS	1111 W 22ND ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL 33010	1.4 CITY - ST - ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDICH, STEPHEN	2.2 NAME	
STREET ADDRESS	1111 W 22ND ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL 33010	2.4 CITY - ST - ZIP	
TITLE	SEC <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDICH, LAWRENCE	3.2 NAME	
STREET ADDRESS	1111 W 22ND ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL 33010	3.4 CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGELLOT, EDWARD	4.2 NAME	
STREET ADDRESS	1111 W 22ND ST	4.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL 33010	4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: _____ Date _____ Daytime Phone # _____

CR2E034 (9/96)