2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 384561** Apr 12, 2000 8:00 am Secretary of State ATLAS ELECTRIC SUPPLIES OF FLORIDA, INC. # 8037 1. Entity Name 04-12-2000 90165 001 ***900.00 Principal Place of Business Mailing Address 1111 W 22ND ST 1111 W 22ND ST HIALEAH FL 33010 HIALEAH FL 33010-1920 BUVI 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-0812272 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Adam D 7. Name and Address of New Registered Agent GORDICH, ALAN MAR 2 ' 2000 Street Address (P.O. Box Number is Not Acceptable) 1111 NW 22ND ST HIALEAH FL 33010 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE \$\$ \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ESIDENT PRES ☐ Change Addition TITLE □ Delete TITLE GORDICH, ALAN NAME NAME STREET ADDRESS 1111 W 22ND ST STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE GORDICH, STEPHEN NAME NAME 1111 W 22ND ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP · SEC Change ☐ Addition Delete TITLE GORDICH, LAWRENCE NAME STREET ADDRESS STREET ADDRESS 1111 W 22ND ST CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 ☐ Change Addition ☐ Delete TITLE TITLE ANGELLOT, EDWARD NAME NAME STREET ADDRESS 1111 W 22ND ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE HIALEAH FL 33010

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with efforts the empowered.

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

☐ Delete

Delete

3-21-00

e Daytime Phone #

☐ Change

Change

☐ Addition

Addition