

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

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Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90065 047 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 384802

1. Corporation Name

FRANK R. CRANDON ELECTRIC, INC.

Principal Place of Business

10850 SW 113TH PLACE
SUITE 112
MIAMI FL 33176

Mailing Address

10850 SW 113TH PLACE
SUITE 112
MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1971

4. FEI Number

59-1353480-

Applied For

Not Applicable

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 20406 SW 54 Place
Suite, Apt. #, etc.

2a. Mailing Address

26 20406 SW 54 Place
Suite, Apt. #, etc.

22 Ft. Laud. Fl.
City & State

27 Ft. Laud. Fl.
City & State

23 33332 Broward
Zip Country

28 33332 Broward
Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRANDON, FRANK R
10850 SW 113 PLACE
SUITE 112
MIAMI FL 33176

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

20406 SW 54 Place

83

84 City

Ft. Laud.

FL

85 Zip Code

33332

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **CRANDON, FRANK R**
STREET ADDRESS **10850 SW 113 PLACE #112**
CITY-ST-ZIP **MIAMI FL 33176**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **20406 SW 54 Place**
1.4 CITY-ST-ZIP **Ft. Laud., Fl. 33332**

TITLE **S** ☐ DELETE
NAME **CRANDON, SANDY**
STREET ADDRESS **10850 SW 113 PLACE #112**
CITY-ST-ZIP **MIAMI FL 33176**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **20406 SW 54 Place**
2.4 CITY-ST-ZIP **Ft. Laud., Fl. 33332**

TITLE **D** ☐ DELETE
NAME **ZEMEL, MORTON**
STREET ADDRESS **2200 LARKSPUR TRAIL**
CITY-ST-ZIP **BOCA RATON FL 33433**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS **22200 Larkspur Trail**
3.4 CITY-ST-ZIP **Boca Raton Fl. 33433**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)