

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 385992 (3)

1. Corporation Name

COMET ELECTRIC, INC.



Principal Place of Business

197-65TH TERRACE. NO.  
WEST PALM BCH FL 33413

Mailing Address

197-65TH TERRACE. NO.  
WEST PALM BCH FL 33413

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	07/27/1971	04/27/1995
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	59-1356432	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24	25	29	30

9. Name and Address of Current Registered Agent

PARKER, MAURICE W  
11031 51ST COURT NORTH  
ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent

81 Name Gertrud Lurtz  
82 Street Address (P.O. Box Number is Not Acceptable)  
314 So. Lakeside Dr.  
83  
84 City Lake Worth FL 85 Zip Code 33460

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 Gertrud Lurtz

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

(NOTE: Registered Agent signature required when reinstating)

April 22, 1996

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	PARKER, MAURICE W	1.2 NAME	Gertrud Lurtz
STREET ADDRESS	11031 51ST COURT NORTH	1.3 STREET ADDRESS	314 So. Lakeside Dr.
CITY-ST-ZIP	ROYAL PALM BEACH FL	1.4 CITY-ST-ZIP	Lake Worth, Fl. 33460
TITLE	S	2.1 TITLE	V
NAME	LURTZ, GERTRUD	2.2 NAME	Mark A. Miller
STREET ADDRESS	314 SOUTH LAKESIDE DRIVE	2.3 STREET ADDRESS	199 Lake Arbor Drive
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP	Palm Springs, Fl. 33461
TITLE		3.1 TITLE	V
NAME		3.2 NAME	Daniel DeFrancis
STREET ADDRESS		3.3 STREET ADDRESS	316 NW 47th St.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Pompano Beach, Fl. 33064
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Gertrud Lurtz  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-96  
Date

(407) 689-4401  
Daytime Phone #

CR2E034 (12/95)