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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 07, 1999 8:00 am Secretary of State

05-07-1999 90127 036 ***150.00

DOCUMENT # 385992 1. Corporation Name COMET: ELECTRIC, INC.			. :	we made					
Principal Place of Business	Mailing Ad					•		INFO WENTE MENTER W	(bit digii ikât.
197-65TH TERRACE, NO. 197-65TH TERRACE, NO.									
WEST PALM BCH FL 33413 WEST PALM BCH FL 33413									
					L		T WRITE IN THIS	SPACE	
						 Date Incorporated or Qu 07/27/1971 	ualifed		
2, Principal Place of Business	2a. Mailin	g Address				4. FEI Number		Apı	olied For
21	26					59-1356432		Not	Applicable
Suite, Apt. #, etc.	Suite,	Apt. #, etc.		_	-	5. Certifcate of Status Des	ired	\$8.75 A	
	27					5, Connecte of Otolog Des		Fee Re	quired
City & State	City &	State				6. Election Campaign Fina	ncing	\$5.00	- 1
23	28			_		Trust Fund Contribution		Added to	Fees
Zip Country	Zip	r-	Count	ry	1	8. This corporation owes the	ne current year Int		l
24 25	29		0			Personal Property Tax.			□No
9. Name and Address of Current	Registered A	igent	8	d Name		10. Name and Address of	New Registered	Agent	
GERTRUD LURTZ			•			ter Lurtz			
314 S LAKESIDE DR			8	2 Street A	Address	(P.O. Box Number is Not A 7 South "O" St	Acceptable)		
LAKE WORTH FL 33460			-		30	7 South "O" Sti	reet		
CARE WORTH PE 33400			8	3					
			8			ke Worth	FL	85 334	1
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State o agent. I am familiar with, and accept the obligation	of Florida, Sucl	n change was aut	horized b	v the corpo	corpora oration's	ition submits this statement s board of directors. I hereb	y accept the appor	nımenı as reg	registered gistered
SIGNATURE Signature, typed or printed name of registered agent		PETI	ΞR	L UR	ZTZ	nen reinstating)	4/2	7/99	
12. OFFICERS AND	DIRECTORS	3	13.			ADDITIONS/CHANGES	TO OFFICERS AN	ID DIRECTO	
TITLE PSTD		DELETE	1.1 TITLE		_ P .:			Change	X Addition
NAME LURTZ, GERTRUD			1.2 NAME	Ξ	LU	RTZ, PETER			Ĭ
STREET ADDRESS 314 SOUTH LAKESIDE DRIVE	8314 SOUTH LAKESIDE DRIVE					7 SOUTH ייOיי STI	REET		ĺ
CITY-ST-ZIP LAKE WORTH FL			1.4 CITY-	ST-ZIP	LA	KE WORTH, FL			
TITLE -V		DELETE	2.1 TITLE		ST	D		X Change	Addition
NAME DEFRANCIS		, .	2.2 NAME	E	LU	rtz, Gertrud			
STREET ADDRESS 318 NW 47T ST			2.3 STRE	ET ADDRESS		4 S OUTH LAKE SII	DE DR.		
CITY-ST-ZIP POMPANOD BEACH FL			2.4 CITY	-ST-ZIP	LA	KE WORTH, FL			
TITLE		☐ DELETE	31 TITLE					Change	☐ Addition
NAME			3.2 NAME	Ē					
STREET ADDRESS			3.3 STRE	ET ADORESS					\
CITY-ST-ZIP			3.4. CITY	1					
TITLE		DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAM	E					
STREET ADDRESS			4.3 STRE	ET ADORESS					
C/TY-ST-ZIP			4.4 CITY	1				_	·
TITLE		DELETE	5.1 TITLE					Change	☐ Addition
NAME			5.2 NAMI	E					ĺ

CITY-ST-ZIP 14. 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Addition

Change