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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 400500

(5)

BISCAYNE ELECTRIC, INC.

## **FILED** Apr 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									{	ill Bloke Blott Grott B	10 (1 03 61 F 10 0 P
8289 N.W. 56 MIAMI FL 33				8289 N.W. 56 ST. Miami Fl 33166					DO NOT WRITE IN 1	THIS SPACE	
1									3. Date Incorporated or Qualified		
									05/04/1972		
2. Principal P	lace of Busi	ness	2a. Maili	2a. Mailing Address					4. FEI Number		Applied For
21			26						59-1423971	1	Not Applicable
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.					5. Certificate of Status Desired	*	Additional
22			27	~							Required
City & State	е		F1	City & State					6. Election Campaign Financing		May Be
Zip Country			28   Zip					Trust Fund Contribution		d to Fees	
24					30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No		
24	9. Name and Address of Curren						<del></del>		10. Name and Address of New Registe		
DIG.					** ****	81	Name		•		
BIRNBAUM, MARC 20801 BISCAYNE BOULEVARD											
SUITE 453						82 Street Address (P.O. Box Number is Not Acceptable)					
	AMI FL 33	180								<del></del>	
	· u • E • •										
-						84	City			FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,							the above-pamed 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.											s registered
SIGNATURE		till and stopped to be	Significant on coor								
SIGNATURE	Signature, type	d or printed name of registered	f agent and litto if applic	stile (NOTE	Registere	d Age	nt signaturo	required	<u> </u>	ATE	
12.			AND DIRECTORS			13.		: C B	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD			DELETE	1.1 TITLE		PD	. R 11 F	Change	Addition	
NAME							1.2 NAME		gins, Ronald E. 19 N.W. 50 Street		[3
STREET ADDRESS 300 N WATAUGA LANE CITY-ST-ZIP LOOKOUT MOUNTAIN TN								89.8	ed MM 20 offeet		ļļ.
CITY-ST-ZIP	FOOK	UI MOUNTAIN IN		DELETE	1.4 CfTY-ST-ZIP			7 ' '	iami, Fr 33166	Change	Addition
NAME				DECEME	2.2 NAME					Criange	- Addition
	( ADDRESS						4DDDCCC	ļ			
STREET ADDRESS CITY-ST-ZIP					2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP			1			
TITLE				DELETE						Change	Addition
NAME				3.2 1		3.2 NAME				_ •	
STREET ADDRESS	·····				3.3 STREET ADDRESS			Ì			
CITY-ST-ZIP	1			3.4. CITY-ST-ZIP			T-ZIP				
TITLE				DELETE 4.1 T		TLE				☐ Change	Addition
NAME					4. 2 NAME						
STREET ADDRESS	TREET ADDRESS			4.3 STREET ADDRES		ADDRESS					
CITY-ST-ZIP					4.4 CITY - ST - ZIP						
TITLE	LE			DELETE	5.1 TITLE				·	☐ Change	Addition
NAME					5.2 N	AME					
STREET ADDRESS					5.3 \$1	REET	ADDRESS				1
CITY-ST-ZIP	. <u>.</u>				5.4 CI		1-ZIP	<u> </u>			
TITLE				☐ DELETE	6.1 TI					Change	Addition
NAME					6.2 N						
STREET ADDRESS					6.3 ST	REET	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 truefal empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change I, or on an attachment with an address.