FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT

Secretary of State DIVISION OF CORPORATIONS

1998

FILED	
May 11 1998 8:00an	n
Secretary of State	

1. Corporatio	MENT # 404853 N-O'BRIEN ELECTRIC, INC	(4)			
Principal Plac	e of Business	Mailing Address		I DOBIST BEBY BODIE BEBO! 10401 BISEN (ILI DIDIL D	IBIT BIBIT BIBIT ÇIDIL BIBIT 1881
\$300 NW 12TH AVE., BAY 9 5300 NW 12TH AVE., BAY 9			9		
FT. LAUDERO	MLE FL 33309	FT. LAUDERDALE FL 33309	•	DO NOT WOLLEN THE	0.00405
				DO NOT WRITE IN THI 3. Date Incorporated or Qualified	S SPACE
				07/13/1972	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	DE 20th 5t.	26 1712 NE 8	90th 5t.	59-1407625	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	<u> </u>		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	6 1 - 1 - 1 - 1 - 1	City & State	d. FL	6. Election Campaign Financing	\$5.00 May Be
23 rort	Lauderdale	28 Fort Lave		Trust Fund Contribution	Added to Fees
Zip 24 333(O USA	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registers	od Agent
	LSON, THOMAS A		°' ' '(72 5)		
	06 NE 17 AVE		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
AAII	LTON MANORS FL 33305		83		
			84 City	F	L 85 Zip Code
11. Pursuant office or r agent 1 a	to the provisions of Sections 607 0502 egistered agent, or both, in the State of familiar with, and accept the obligat	and 607.1508, Florida Statutes of Florida Such change was au ions of, Section 607.0505, Flori	the above-named con thorized by the corpora da Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE					
	Signature, typod or printed name of registered agent OFFICERS AND		Registered Agent signature requ	uired when reinstalling) ADDITIONS/CHANGES TO OFFICERS A	
12. TITLE	PD OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	WILSON, THOMAS A		1.2 NAME		
STREET ADDRESS	2306 NE 17 AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON MANORS, FL 00000		1.4 CITY-ST-ZIP	•	
TITLE	VD	DELETE	2.1 TITLE	700	Change Addition
NAME	WILSON, MARIANNE		2.2 NAME	€, ≠	
STREET ADDRESS	2306 NE 17 AVE		2.3 STREET ADDRESS		Ì
CITY-ST-ZIP	WILTON MANORS, FL 00000		2 4 City - ST - ZIP		
TITLE	STD	DELETE	3.1 TITLE		Change Addition
NAME	CAPRIO, DAVID.		3.2 NAME		
STREET ADDRESS	1712 N.E. 20 ST.		3 3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		Į
CITY - ST - ZWP		C DELETE	4.4 CITY - ST - ZIP		1 00000
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE NAME		L. Mille	6.1 TITLE 62 NAME		Change Changing
STREET ADDRESS			6.3 STREET ADDRESS)
CITY-ST-ZIP	actifut had the information eventual with	this filing does not qualify for	6.4 CITY-ST-ZIP	Contine 110 07/2/(i) Elecide Statutes I further	postify that the information

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.

GNATURE:

Which President 4/30/98 (954) 568-5018