| | E NOW: FILING FEE | AFTER MAY 1 IS | |] | | I |
|---|--|--|---|--|---|---------------|
| 1 | PORATION | | . Mortham | | | |
| | 1996 | | y of State ORPORATIONS | | | |
| | MENT # 454548 | | | | | |
| 1. Corporation | n Name | 5 (5) | | | | i |
| PALM | BEACH ELECTRIC, INC. | | | I IBBHU ANDAL ANDAL ANDAL ANDAL AND | n i ka anan anan araka kan anan araka an | |
| Principal Place | of Business | Mailing Address | | | | |
| 1400 ALABAI SUITE 3 WEST PALM | MA AVE. BCH. FL 33401 | 1400 ALABAMA AVE. Suite 3 West Palm Bch. Fl 33 | 601 | | | |
| | | | | 3. Date Incorporated or Qualified 06/11/1974 | 3a. Date of Last Report 08/25/1995 | |
| <u> </u> | ace of Business | 2a. Mailing Address | 0 | 4. FEI Number | Applied For | |
| 21 2000 Suite, Apt. | N. Florida Margo Ka #, etc. | Suite, Apt. #, etc. | la Mango K | 59-1679973 5. Certificate of Status Desired | Not Applicable | |
| 22 Sut 12 City & State | | 27 Suite 102 City & State | | | Fee Required | |
| 23 West | Palm Beach, PL | 28 West Palm B. | each, FL | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip 24 33409 | 9 25 USA | 29 33409 | | B. This corporation has liability for Florida Statutes | intangible tax under s 199.032, s 🔄 No | |
| | 9. Name and Address of Curren | | | 10. Name and Address of New I | | |
| | | | 81 Name 82 Street | Aniel E, NEFF | | |
| | NEFF, DANIEL E 1400 ALABAMA AVE, STE 3 | | | Address (P.O. Box Number is Not Accepta | 2 sulcioa | |
| W PALM | I BCH FL 33401 | | 83 | 3 | | |
| | | | 84 City | st Palm Beach | FL B5 Zip Code 33409 | |
| 11. Pursuant t or register | to the provisions of Sections 607.0502 red agent, or both, in the State of Florid | and 607.1508, Florida Statutes, a. Such change was authorized | the above-named or by the corporation's | orporation submits this statement for the public board of directors. I hereby accept the app | rpose of changing its registered office | |
| | th, and accept the obligations of, Sect | | | sident | | |
| | Signature, typed or printed name of registeren agent a | and title if applicable. (NOTE) | Registered Agent signature i | required when reinstating) | 4/24/96 | ي |
| 12. TITLE | OFFICERS AND | DIRECTORS | 13. 1.1 TITLE | ADDITIONS/CHANGES TO OFI | FICERS AND DIRECTORS IN 12 | 2E034 (12/95) |
| NAME | NEFF, NEAL J | | 1.2 NAME | | | 34 (|
| STREET ADDRESS | 123 EXECUTIVE CIRCLE BOYNTON BEACH FL | | 1.3 STREET ADDRESS | | | SEO |
| CITY-ST-ZIP TITLE | D | DELETE | 1.4 CIRY - ST - ZIP 2 1 TITLE | | Change Addition | Ϋ́ς |
| NAME | MCBANE, LOUIS R | · | 2 2 NAME | | | |
| STREET ADDRESS | 515 N. FLAGLER DR. W. PALM BEACH FL | | 2 3 STREET ADDRESS | | | |
| CHTY-ST-ZIP TITLE | D | DELETE | 24 CATY-ST-ZIP 3 1 TITLE | | Change 🗍 Addition | |
| NAME | NEFF, PAULINE M. | | 3.2 NAME | | | |
| STREET ADDRESS CITY+ST-ZIP | 123 EXECUTIVE CIRCLE BOYNTON BEACH FL | | 3.3. STREET ADDRESS | | | |
| TITLE | PTD | DELETE | 3.4 CITY-ST-ZIP 4. 1 TITLE | | Change Addition | |
| NAME | NEFF, DANIEL E. | | 4.2 NAME | | — | |
| STREET ADDRESS | 1531 HOLLYHOCK RD. W. PALM BEACH FL | | 4.3 STREET ADDRESS | | | |
| P(TV. CT 2/0 | | | 4.4 CITY - ST - ZIP 5. 1 TITLE | D | Change 🔣 Addition | |
| C/TY+ST-Z/P TITLE | | | | 1 A A)20F | — | |
| TITLE NAME | | | 5.2 NAME | Holly Allahack Rd | | Ì |
| TITLE NAME STREET ADDRESS | | | 5.2 NAME 5.3 STREET ADDRESS | 1531 Holly hock Rd 1531 Holly hock Rd W. Re In Beach EL 22414 | | |
| TITLE NAME | | DELETE | 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6. 1 TIILE | Holly A. NEFF 1531 Hollyhock Rd. W.Ralm Beach, FL 33414 | 🗌 Change 📄 Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME | | _ | | W.Re.Im Beach, FL 33414 | Change 🗋 Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS | | _ | 6. 1 TITLE 6.2 NAME 6.3 STREET ADDRESS | Holly A. Werk RZ 1531 Hollyhock RZ W.Rulm Beach, FL 33414 | Change 🗋 Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP 14. L do bereby | y certify that the information supplied w | DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP | life for the evention stated in Section 110 | 07/2010 Elocido Stotutor L futbor | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that oath; that I | the information indicated on this annu- | DELETE DELETE DELETE DELETE bith this filing is voluntarily furnish al report or supplemental annual ation or the receiver or trustee a n an attachment with an address an address | 6. 1 TILE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ed and close not qua report is true and ac mpowered to execut 3. | | 1.07(3)(k), Florida Statutes, I further | |