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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

GUES	Name T LIGHTING, IN	C.									
Principal Place	of Business		Mailing Add	ress	····	·	I FBQ\U\ U\IJU LAFI	IT (FID) DIIID IID	IIT TUUL UKUNL U		IBN GIBN BIBN IODA
P.O. BOX 5	1791 BLOUNT ROAD P.O. BOX 510 POMPANO BEACH FL 33069		P.O. BO	1791 BLOUNT ROAD P.O. BOX 510 POMPANO BEACH FL 33069							
							3. Date Incorporated of 03/28/1978	or Qualified	3a. Date	of Last F <b>)4/25/</b> 1	
2. Principal Pla	ce of Business		2a. Mailing	Address			4. FEI Number 59-181193	13	- <del>                                    </del>	J	Applied For Not Applicable
Suite, Apt. #	, etc.		Suite, A	pt. #, etc.			5. Certificate of Status	Desired		\$8.7	5 Additional Required
City & State			City & S	itate			6. Election Campaign I			\$5.0	00 May Be
3 <u> </u> Zip ⊡1	Count	try	Zip		Country	<del></del> ,	Trust Fund Contribu  8. This corporation has	s liability for in	ntangible ta		ed to Fees 199.032,
4	9. Name and Addi	ress of Current (	29 Registered As	ent	30		Florida Statutes  10. Name and Addres	Yes		lant.	
1791 B	I, ROBERT E. LOUNT RD. #510 NO BEACH FL 33(	069			81 82 83		dress (P.O. Box Number is N	ot Acceptabl	le)		
					84	City			FL	85 2	ip Code
or registere	o the provisions of Sec id agent, or both, in th n, and accept the oblic	ie State of Florida.	Such change	was authoriz	es, the above-r	named coroo	oration submits this statemen ard of directors. I hereby acc	nt for the purp ept the appo	nose of char	nging its registere	registered office d agent. I am
or registere familiar with SIGNATUREs	id agent, or both, in the and accept the oblic	ie State of Florida. gations of, Section	Such change 1 607.0505, Flo d little if applicable.	was authoriz irida Statutes	es, the above-r	named corpo oration's box	ard of directors. I hereby acc	ept the appo	pose of char pose of char post as i	registere	d agent. I am
or registere familiar with SIGNATURE	id agent, or both, in the and accept the oblic signature typed or profits from PST	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E	Such change 607.0505, Flo d little if applicable. DIRECTORS	was authoriz irida Statutes	es, the above-red by the corpo	named corpo oration's box	and of directors. I hereby acc	ept the appo	DATE CERS AND	registere	d agent. I am
or registere familiar with SIGNATURE	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo d little if applicable. DIRECTORS	was authoriz rida Statutes (No	es, the above-red by the corporation.  TE Registered Agen  13.	named corpo oration's box	and of directors. I hereby acc	ept the appo	DATE CERS AND	registere	DRS IN 12
or registere familiar with SIGNATURE	od agent, or both, in the and accept the oblig signature speed or printed name.  PST MARTIN, ROBE	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo d little if applicable DIRECTORS	was authoriz vrida Statutes (NO	es, the above-red by the corposition.  TE Registered Agen  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-S	named corpo oration's boa at signature requir	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE 5  12.  TILE NAME STREFF ADDRESS CITY - ST - ZIP	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo d little if applicable DIRECTORS	was authoriz rida Statutes (No	es, the above-red by the corposition.  ITE Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-S  2.1 TITLE	named corpo oration's boa at signature requir	and of directors. I hereby acc	ept the appo	DATE CERS AND	registere	DRS IN 12
or registere familiar with SIGNATURE	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo d little if applicable DIRECTORS	was authoriz vrida Statutes (NO	es, the above-red by the corposition.  Its Registered Agent 13.  1.1 TILE 12 NAME 13 STREET 14 CITY-S 2 1 TITLE 22 NAME	named corporation's both at signature requirements and a signature requirements and a signature requirements and a signature requirements are signature requirements.	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE 5  12.  1-1LE NAMÉ STREFI ADDRESS GITY - ST - ZIP TITLE NAME STREET ADDRESS	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo d little if applicable DIRECTORS	was authoriz vrida Statutes (NO	es, the above-red by the corposition.  TE Registered Agen  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREET	named corpororation's box at signature requir ADDRESS T-ZIP ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	was authoriz vrida Statutes (NO	es, the above-red by the corposition.  Its Registered Agent 13.  1.1 TILE 12 NAME 13 STREET 14 CITY-S 2 1 TITLE 22 NAME	named corpororation's box at signature requir ADDRESS T-ZIP ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE 5  12.  1-1LE NAMÉ STREFT ADDRESS GITY - ST - ZIP TITLE NAME STREEL ADDRESS GITY - ST - ZIP TITLE TIT	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	was authorizerida Statutes  NO DELETE	es, the above-red by the corposition.  TE Registered Agen  13.  1.1 TILE  1.2 NAME  1.3 STREET  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREET  2.4 CITY-S	named corpororation's box at signature requir ADDRESS T-ZIP ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Add:tion Addition
or registere familiar with SIGNATURE 5  12.  1-TILE NAMÉ STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	was authorizerida Statutes  NO DELETE	es, the above-red by the corps:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Add:tion Addition
OF registers familiar with SIGNATURE 5  12.  17.  17.ILE  NAME STREET ADDRESS CITY - ST - ZIP TITLE  NAME STREET ADDRESS CITY - ST - ZIP TITLE  NAME STREET ADDRESS CITY - ST - ZIP TITLE  NAME STREET ADDRESS CITY - ST - ZIP TITLE  NAME STREET ADDRESS CITY - ST - ZIP	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	was authorizerida Statutes  NO  DELETE  DELETE	es, the above-red by the corps:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S	ADDRESS T-ZIP  ADDRESS T-ZIP	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Addition Addition
Or registere familiar with SIGNATURE 5  12.  12.  13.  14.  15.  16.  17.  16.  17.  16.  17.  17.  17	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	was authorizerida Statutes  NO DELETE	es, the above-red by the corps:  13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE	ADDRESS T-ZIP  ADDRESS T-ZIP	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Addition
OF FEGISTER  FOR THE SIGNATURE  12.  17.  17.  17.  17.  17.  17.  17.	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	was authorizerida Statutes  NO  DELETE  DELETE	es, the above-red by the corps:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME	ADDRESS 11-ZIP  I ADDRESS 11-ZIP	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Addition Addition
OF FEGISTER  FARTHER  SIGNATURE  E  12.  17.  17.  17.  17.  17.  17.  17.	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	was authorizerida Statutes  NO  DELETE  DELETE	es, the above-red by the corps:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	ADDRESS 11-ZIP ADDRESS 11-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Addition Addition
OF FEGISTERE FAMILIAR WITH SIGNATURE  12.  17.  17.  17.  17.  17.  17.  17.	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	was authorizerida Statutes  NO  DELETE  DELETE	es, the above-red by the corps:  13.  1.1 TITLE 12 NAME 13 STREET 14 CITY-S 2 1 TITLE 22 NAME 23 STREET 24 CITY-S 3 1 TITLE 32 NAME 33 STREET 34 CITY-S 4.1 TITLE 42 NAME 43 STREET 44 CITY-S	ADDRESS 11-ZIP  ADDRESS 11-ZIP  ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change Change Change Change	DRS IN 12  Addition  Addition
OF FEGISTERE FAMILIAR WITH SIGNATURE  12.  12.  13.  14.  15.  15.  15.  15.  15.  15.  15	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	Was authorizerida Statutes  NO  DELETE  DELETE  DELETE	es, the above-red by the corps:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE	ADDRESS 11-ZIP  ADDRESS 11-ZIP  ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change	DRS IN 12 Addition Addition
OF FORSISTER  FAME  SIGNATURE  E  12.  TILE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	Was authorizerida Statutes  NO  DELETE  DELETE  DELETE	es, the above-red by the corps:  13.  1.1 TITLE 12 NAME 13 STREET 14 CITY-S 2 1 TITLE 22 NAME 23 STREET 24 CITY-S 3 1 TITLE 32 NAME 33 STREET 34 CITY-S 4.1 TITLE 42 NAME 43 STREET 44 CITY-S	ADDRESS 11-ZIP ADDRESS 11-ZIP ADDRESS 11-ZIP ADDRESS 11-ZIP	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change Change Change Change	DRS IN 12  Addition  Addition
OF FOGISTORE familiar with  SIGNATURE  12.  TILE NAMÉ STREFI ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change 607.0505, Flo	Was authorizerida Statutes  NO  DELETE  DELETE  DELETE	es, the above-red by the corps:  13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change Change Change Change	DRS IN 12  Addition  Addition
OF FOGISTORE familiar with  SIGNATURE  12.  17.  17.  17.  17.  17.  17.  17.	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	Was authorizerida Statutes  NO  DELETE  DELETE  DELETE	es, the above-red by the corps:  13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO Change Change Change Change	DRS IN 12  Addition  Addition
OF FEGISTER  FAMILIAN  SIGNATURE  12.  TILE  NAMÉ  STREFI ADDRESS  GITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	of agent, or both, in the control accept the obligation by the control of the con	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	WAS AUTHORIZ  PRICE  DELETE  DELETE  DELETE  DELETE	es, the above-red by the corps:  13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO   Change   Change   Change   Change   Change   Change	DRS IN 12  Addition  Addition  Addition
or registere familiar with SIGNATURE	of agent, or both, in the and accept the obligation by the obligation of the obligat	ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E ERT E RD. #510	Such change in 607.0505, Flo	WAS AUTHORIZ  PRICE  DELETE  DELETE  DELETE  DELETE	es, the above-red by the corps:  13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE	ADDRESS IT-ZIP  ADDRESS IT-ZIP  ADDRESS IT-ZIP  ADDRESS IT-ZIP  ADDRESS IT-ZIP	and of directors. I hereby acc	ept the appo	DATE CERS AND	DIRECTO   Change   Change   Change   Change   Change   Change	DRS IN 12  Addition  Addition  Addition

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR