## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 08, 2000 8:00 am **DOCUMENT # 568980 Secretary of State** 1. Entity Name RICHARDSON ELECTRICAL CONTRACTORS, INC. 02-08-2000 90131 006 \*\*\*150.00 Mailing Address Principal Place of Business 701 S.W. 18TH COURT 701 S.W. 18TH COURT FORT LAUDERDALE FL 33315-2041 FORT LAUDERDALE FL 33315-2041 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1838906 \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICHARDSON, STEPHEN Street Address (P.O. Box Number is Not Acceptable) 701 S.W. 18TH COURT FORT LAUDERDALE FL Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Addition ☐ Change TITLE Delete TITLE NAME RICHARDSON, STEPHEN D NAME STREET ADDRESS STREET ADDRESS 701 S W 18TH CT CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE, FL 00000 ☐ Change ☐ Addition Delete TITLE RICHARDSON, HENRY C NAME NAME STREET ADDRESS STREET ADDRESS 1241 N 74TH HWY CITY-ST-ZIP HOLLYWOOD, FL 00000 CÍTY-ST-ZIP ☐ Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP \* Change - Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIF Addition ☐ Change A wife Digwest TITLE Delete TITLE Burn Bak NAME NAME STREET ADDRESS 4 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Additio Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR