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

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OCUN	MENT# 5	73267	(2)						
. Corporation	Name		(-)						
MR, E	ELECTRIC CO., INC	; .							
Principal Place	of Business		failing Address						
1822 SW 10 MIRAMAR F			1822 SW 100 AVE MIRAMAR FL 33025						
						 Date Incorporated or Qualified 05/23/1978 		of Last Re	•
. Principal Pla	ace of Business	2a 26	. Mailing Address			4. FEI Number 59-1844799			oplied For lot Applicable
Suite, Apt. #	#, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional Required
Crty & State	}	28	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00	May Be
Zip	Country 25	29	Zip	Country	,	8. This corporation has liability for	intangible ta		
<u> </u>	9. Name and Addres		stered Agent	30		10. Name and Address of New F		Agent	
	**			81	Name			<u> </u>	
	RDS, JAMES P JR Burmuda Drive			82	Street Addr	ess (P.O. Box Number is Not Acceptab	ole)		
	AR FL 33025			83					
				84	City		FL	B5 Zip	Code
Pursuant to or registers	to the provisions of Section	ns 607.0502 and 60	07.1508, Florida Statute	s, the above-r	named corpor	ration submits this statement for the pur	rpose of cha	inging its re	egistered offic
or registere familiar with IGNATURE	ed agent, or both, in the S th, and accept the obligati Signature, typed or printed hance of	State of Florida, Suc ons of, Section 607 registered agent and title if	h change was authorize (.0505, Florida Statutes. (NO	ed by the corp	oration's boar	rd of directors. I hereby accept the app	rpose of cha ointment as	registered	agent. I am
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 applicable that the information is the property of the corporation 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 applicable that my name appears in Block 12 or Block 13 if changed, or on applicable that my name appears in Block 12 or Block 13 if changed, or on applicable that my name appears in Block 12 or Block 13 if changed, or on applicable that my name appears in Block 12 or Block 13 if changed, or on applicable that my name appears in Block 12 or Block 13 if changed, or on applicable that my name appears in Block 12 or Block 13 if changed in the property of the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

SIGNATURE:

OLA THE AND TYPE OF ANINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 954-435-2640