

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 592383

(4)

1. Corporation Name
EXCEL ELECTRIC CORP.



Principal Place of Business
6501 NW 13TH CT., #15
PLANTATION FL 33313

Mailing Address
6501 NW 13TH CT., #15
PLANTATION FL 33313-4550

3. Date Incorporated or Qualified 10/31/1978	3a. Date of Last Report 04/12/1996
4. FEI Number 59-1882511	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

ENSIGN, DON
7291 NW 15TH STREET
PLANTATION FL 33313

10. Name and Address of New Registered Agent

81 Name Ensign, Donald O.
82 Street Address (P.O. Box Number is Not Acceptable)
83 9242 Southern Orchard No.
84 City, Davie FL 85 Zip Code 33328

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and agree to the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Donald Ensign

(NOTE: Registered Agent signature required when reinstating)

Jan-10-97

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENSIGN, DON	1.2 NAME	
STREET ADDRESS	7291 NW 15TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 00000	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	P/S/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENSIGN, DONALD O.	2.2 NAME	Ensign, Donald O.
STREET ADDRESS	2622 NE 5TH ST	2.3 STREET ADDRESS	9242 Southern Orchard Rd.
CITY-ST-ZIP	POMPANO BEACH FL	2.4 CITY-ST-ZIP	Davie, FL 33328
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Ensign, Ronald
STREET ADDRESS		3.3 STREET ADDRESS	781 N. Figtree Lane
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Plantation, FL 33317
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 justice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 and changed, or on an attachment with an address.

SIGNATURE:

Donald D. Ensign
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan-10-97

Date

(954) 581-2330

Daytime Phone #

CR2E034 (9/96)