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

598742 **DOCUMENT #**

(5)

P.I. ELECTRIC, INC.



Principal Place of Business 5840 YOUNGOUIST ROAD FT. MYERS FL 33912-2214		Mailing Address 5840 YOUNGOUIST ROAD FT. MYERS FL 33912-2214				3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995			
2. Principal P	Place of Business	28. Mailing Address				4. FEI Number 59-1864538	05/01/	Applied For	
21		26				59-1864538		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #. etc.				5. Certificate of Status Desired	1 1	.75 Additional	
Uny & Stat	e	City & State				6. Election Campaign Financing	\$:	5.00 May Be	
3		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	F	untry		8. This corporation has liability for i		ers 199.032,	
24	25	29'	30	T		Florida Statutes Yes 10. Name and Address of New R			
	9. Name and Address of Currer	it Registered Agent		81	Name	10, Name and Address of New N	egistered Agen	·	
CANNAVA, JOHN EDWARD									
	OUNGQUIST RD			82	Street Addr	Address (P.O. Box Number is Not Acceptable)			
	ERS FL 33912			83		ALL CARPONING			
				84	City		— 85	Zıp Code	
	(O) OOF 5500	THE CONTROL OF THE CA	<u>-</u>	<u></u>	<u></u>	the state of the s	FL	its reportand office	
or reaste	ered agent, or both, in the State of Flori	da. Suer change was eutr	forized by the	corb	named corpor loration's boa	ration submits this statement for the pur ind of directors. I hereby accept the appo	prose of changing ontment as regist	ered agent. Lam	
familiar	with, and accept the obligations of Sec	tion 607.0505, Florida Stati	utes. Dna	ر ،	MIT	·	2296		
SIGNATURE	Signature, typed or printed name of registered agen		- TIO	ا (رین) سمه ه	IUDI	a when remaining?	LL 10		
12.		ID DIRECTORS	13.		Tograma oqu	ADDITIONS/CHANGES TO OFF	ICERS AND DIRE	CTORS IN 12	
THILE	PD	☐ DELETE	1 1	1-1LF			☐ Cha	nge 🔲 Addition	
NAME	Cannava, John Edward			1.2 NAME 1.3 STREFT AUDRESS					
STREET ADDRESS	5840 YOUNGQUIST ROAD								
CITY - ST - ZIP	FT. MYERS FL				5F- Z-P				
TITLE	V	DELETE		TITLE			☐ Cha	nge Addition	
NAME	FOOR, TERRY G		221	NAME					
STREET ADDRESS	5840 YOUNGQUIST RD		235	STREET	L ADDRESS				
CITY-ST-ZIP	FT MYERS FL				ST-ZIP				
TIFLE	ST	☐ DELETE		TITLE			Cha	nge Addition	
NAME	LANDIS, BONITA J.		321	NAME					
STREET ADDRESS	5840 YOUNGQUIST ROAD		3.3	STREE	* ADDRESS				
CITY-SI-ZIP	FT. MYERS FL				S1 - ZIP				
THILE		DELETE		TIFLE	····-		Ctia	nge 🔲 Addition	
NAME		_	421	VAME					
STREET ADDRESS					LADORESS				
CITY-ST-ZIP			1		ST - ZIP				
TITLE		DELETE		TiTLE			Cna	inge Addition	
NAME			5.21	VAM:	ļ				
STREET ADDRESS	.				I ADDRESS				
CITY-ST-ZIP					ST - ZIP				
TITLE		DEL ETE		TILE			Cha	inge Addition	
NAME				NAME			_	_	
STREET ADDRESS					I ADDRESS				
					SI-ZIP				
CITY - ST - ZIP	1		041	0111	0 · LI'				

14. I do hereby certify that the information supplied with this fring 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 angual robot as if made under cath, that I am an officer or director of true coperation of the capture of this report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an officer or director of true coperation of the capture of this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 terranged or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

42296 941 489 4770