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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OF AR



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

1996

1. Corporation	MENT # 6141 ELECTRIC CO., INC.	65 (9)			
Principal Place	of Business	Mailing Address			
6601 SW 41ST ST MIAMI FL 33155		6801 SW 41ST ST MIAMI FL 33155			
				3. Date Incorporated or Qualified 03/22/1979	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4, FEI Number	03/03/1995 Applied For
21		26		59-1925103	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stale		City & State		6. Election Campaign Financing	55.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip	Country	8. This corporation has liability for int	
	9. Name and Address of Cur	29 rrent Registered Agent	30	Florida Statutes Yes 10. Name and Address of New Reg	
	J		81 Name	10. Name and Address of New Ne	gistered Agent
REYES, ALBERT, JR			82 Street Ado	ress (P.O. Box Number is Not Acceptable)	
6001 S W 41 ST			Street Add	ress (F.O. DOX Northbo: Is NOT Acceptable,	
MIAMI FL 33155			83		
			84 City		FL 85 Zip Code
SIGNATURE	n, and accept the obligations of, S Signature, typed or printed name of registered a	section 607.0505, Florida Statutes sent and tille if applicable (NO	TE: Registered Agent signature, require	and of directors. Thereby accept the appoint	ntment as registered agent. I am
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE NAME	ptd Reyes, albert Jr	☐ DELETE	1 1 TITLE		Change Addition
STREET ADDRESS	6601 SW 41ST ST		1.2 NAME 1.3 STREET ADDRESS		
CHTY - ST - ZIP	MIAMI FL		1.4 CIYY - ST - ZIP		
TITLE	\$D	☐ DELETE	2 1 TITLE		Change Addition
NAME	REYES, NIDIA		2.2 NAME		
STREET ADDRESS	6601 SW 41ST ST		2 3 STREET ADDRESS		
CITY · S' - ZIP TITLE	MIAMI FL		2.4 CITY-ST-ZIP		C Ohana C Address
NAME		[] DELETE	3. 1 TITLE 3.2 NAMŁ		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CHTY-ST-ZIP			3 4 CITY - ST - ZIP		
TUTLE		DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS	i i i popropore i como a que a su a su en en el como de la como de	e ngay jira aya wasayaray sa sisa s	4.3 STREET ADDRESS		
CITY-S1-7IP	*		4.4 CITY-ST-ZIP	<u>, , , , , , , , , , , , , , , , , , , </u>	
TITLE		☐ DELETE	\$ TITLE		Change Addition
NAME OZOGOT LIDIDOGOD	والبواق أسطو والانام بمنية الرواق سريان بالمواودين	ar kongderning om er i arbeiterna grip i kongologi (grip i arbeiterna).	5.2 NAME 12	·	
STREET ADDRESS			5.3 STREFT ADORESS		
CITY - ST - ZIP TITLE		DELETE	5.4 CITY-\$1-ZIP 6.1 TITLE		Change Addition
NAME		Descrit	6 2 NAME		□ cuende □ venition
STREET ADDRESS			6.3 STREFT ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do hereby	certify that the information suppli	ed with this filing is voluntarily furn	shed and doos not qualify:	for the exemption stated in Section 119.07	(3)(k), Florida Statutes. I further
oath; that I appears in	am an officer or director of the co Block 12 or Block 13 if changed,	annual report of slipple montal annu proporation of the Leguive for trusted or on an attach in with an addin	uai report is true and accura e empowered to execute th ess.	ate and that my signature shall have the sa is report as required by Chapter 607, Florida	me legal effect as if made under da Statutes; and that my name

IGNING OFFICER OR DIRECTOR