2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 24, 2000 8:00 am Secretary of State **DOCUMENT # 614165** 1. Entity Name A & R ELECTRIC CO., INC. 02-24-2000 90049 041 ***163.75 Principal Place of Business Mailing Address 6601 SW 41ST ST 6601 SW 41ST ST MIAMI FL 33155-5108 BG021460 MIAMI FL 33155 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1925103 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REYES, ALBERT, JR Street Address (P.O. Box Number is Not Acceptable) 6001 S W 41 ST MIAMI FL 33155 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change PTD ☐ Detete ☐ Addition TITLE REYES, ALBERT JR NAME NAME STREET ADDRESS 6601 SW 41ST ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL SD Delete TITLE Change ☐ Addition TITLE REYES, NIDIA NAME NAME STREET ADDRESS 6601 SW 41ST ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition 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-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director the trip this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filing does no indicated on this report or supplemental report is true and of the corporation or the receiver or trustee empowere curate changed, or on an attachment with an address, w

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OF PRI SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)