

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

FILED
Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # 615445 (4)
1. Corporation Name
FAME ELECTRIC, INC.



Principal Place of Business
8077 CLARK CENTER AVE
SARASOTA FL 34236

Mailing Address
P.O. BOX 20728
SARASOTA FL 34276-3728
US

2. Principal Place of Business
21 2826 Lexington St.
Suite, Apt. #, etc.
22
City & State
23
Zip
24 34231
Country
25
26 P.O. BOX 20728
Suite, Apt. #, etc.
27
City & State
28 SARASOTA FL
Zip
29 34276-3728
Country
30 SA

3. Date Incorporated or Qualified
03/27/1979

3a. Date of Last Report
04/22/1996

4. FEI Number
59-1898431

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

COMELLO, ANTHONY A.
1125 COQUILLE DRIVE
SARASOTA FL 34242

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
COMELLO, ANTHONY A.
8077 CLARK CENTER AVE
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. LE ☒ Change ☐ Addition
1. ME
1. REET ADDRESS
2826 Lexington St.
1. TY-ST-ZIP
34231
2. LE ☐ Change ☐ Addition
2. ME
2. REET ADDRESS
2. TY-ST-ZIP
3. LE ☐ Change ☐ Addition
3. ME
3. REET ADDRESS
3. TY-ST-ZIP
4. LE ☐ Change ☐ Addition
4. ME
4. REET ADDRESS
4. TY-ST-ZIP
5. LE ☐ Change ☐ Addition
5. ME
5. REET ADDRESS
5. TY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for 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 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone

Anthony A. Comello

4/10/97 941-922-2987

CR2E034 (9/96)