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

**PROFIT** CORPORATION ANNUAL REPORT

1999



## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Mar 10, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE

03-10-1999 90274 039 \*\*\*150.00

DOC	<b>JMENT</b>	# 6!	57573

1. Corporation Name

ELECTR	ICAL MATERIALS INSTALL	ATION, INC.							
Principal Place of Business Mailing Address 3711 TROUT ISLAND PL MELBOURNE FL 32934 MELBOURNE FL 32934 US US							`		
US -					İ	<ol> <li>Date incorporated or Qualifed 02/29/1980</li> </ol>			
	lace of Business	2a. Mailing Address				4. FEI Number 59-1999567			plied For t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A	dditional
City & Stat		City & State				6. Election Campaign Financing		\$5.00	<u></u>
23	28					Trust Fund Contribution		Added to	
Zip 24	Country	Zip 29 3	Country			This corporation owes the cur Personal Property Tax.			□No
	9. Name and Address of Curr	ent Registered Agent			1	0. Name and Address of New	Registered A	gent	
VANT E	DUDNI TVOONE LEE		81	Name					
	Burn, Tyrone Lee 1 Trout Island Pl		82	Street	Address	(P.O. Box Number is Not Accep	table)		
	BOURNE FL 32934		83			<del></del>			
			-					85 Zip C	odo.
			84	City			FL	1 1	
-11. Pursuant office or ragent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obli	302 and 607.1508, Florida Statutes e of Florida. Such change was autigations of, Section 607.0505, Florid	, the above horized by la Statutes	e-named the corpo	corporation's	tion submits this statement for the board of directors. I hereby acce	ept the appoin	manging its. tment as reg	registered )istered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE: Ri	egistered Agen	t signature re	required whe		DATE		
12.		AND DIRECTORS	13.	1	т	ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	PST	☐ DELETE	1.1 TITLE		ļ			☐ Change	☐ Addition
NAME	WILBURN, TYRONE LEE		1.2 NAME	ADDDESS					-
STREET ADDRESS	3711 TROUT ISLAND PL MELBOURNE FL		1.3 STREET 1.4 CITY-S						
CITY-ST-ZIP TITLE	D	☐ DELETE	2.1 TITLE	1-ZIF		<u></u>		Change	Addition
NAME	WILBURN, TYRONE LEE		22 NAME						
STREET ADDRESS	3711 TROUT ISLAND PL		2.3 STREET	ADDRESS					
CITY-ST-ZIP	MELBOURNE FL		2. 4 CITY- S	T- ZIP					
TITLE		☐ DELETE	3.1 TITLE					☐ Change	Addition
NAME	<b>}</b>		3.2 NAME						
STREET ADDRESS			3.3 STREET						
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP				☐ Change	Addition
TITLE NAME		C) Descir	4.7 (TILL				<b></b>		}
STREET ADDRESS			4.3 STREE	ADDRESS					-
CITY-ST-ZIP			4 4 CITY-S						
TITLE		☐ DELETE	51 TITLE					☐ Change	Addition
NAME			52 NAME						}
STREET ADDRESS			53 STREE						1
CITY-ST-ZIP		☐ DELETE	5.4 CITY-S 6.1 TITLE	T-ZIP	-			Change	Addition
TITLE		□ percie	6.2 NAME						
NAME STREET ADDRESS			6.3 STREET	ADDRESS					ĺ
O INCLI MODINGSS	1		-		i				i

14. I 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 frustee 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, with all other like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

407-733-6005