

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jun 11 1996 8:00 am
Secretary of State

DOCUMENT # 661670 (0)

1. Corporation Name

EDD HELMS ELECTRICAL CONTRACTING, INC.



Principal Place of Business

17850 NE 5TH AVE.
MIAMI FL 33162-8008
US

Mailing Address

17850 NE 5TH AVE.
MIAMI FL 33162-8008
US

3. Date Incorporated or Qualified
04/07/1980

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

59-1988896

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

HELMS, WADE L
17850 NE 5TH AVE.
MIAMI FL 33162

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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

L. Wade Helms

L. Wade Helms

5/31/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE
	FALCON, YOLANDA	17850 NE 5TH AVE.	MIAMI, FL 00000	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
	V KOMARMY, JOSEPH	17850 NE 5TH AVE.	MIAMI FL 33162	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
	R VP/SEC. HELMS, CAROL A.	17850 NE 5TH AVE.	MIAMI FL 33162	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
	VP PRES HELMS, W. E. JR.	17850 NE 5TH AVE.	MIAMI FL 33162	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
	VPD HELMS, L. W.	17850 NE 5TH AVE.	MIAMI FL 33162	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 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 including or on an attachment with an address.

SIGNATURE:

L. Wade Helms

L. Wade Helms

5/31/96

305-653-2520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)