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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 674690

(3)

BELLINS ELECTRIC SUPPLY CORPORATION

Principal Place of Business Mailing Address 8455 S.W. 89 ST. 9455 S.W. 89 ST. MIAMI FL 33156 MIAMI FL 33156-7335											
								Date Incorporated or Qualified 06/24/1980		of Last Re //1996	aport
	Place of Business	}—·1	g Address				4.	FEI Number 59-2007739			plied For
Suite: Ant	# etc	26 Suite.	Suite, Apt. #, etc.			╂			\$8.75 A	t Applicable	
22		27				5.	Certificate of Status Desired		Fee Re		
City & Stat	to	}	City & State				6.	Election Campaign Financing		\$5.00	
23 Zip	Country	28 Zip	Zip Country					Trust Fund Contribution This corporation has liability for in	ntangible ta	Added to	
24	25	29	30				Ŭ.		Yes 🔲		150.032,
	9. Name and Address of Co	rrent Registered	Agent		Ш.		10.	Name and Address of New Rec	istered Aç	ent	
845	Lins, Jack 5 SW 89 ST .MI FL 33158				81 82 83	Name Street Addr	ess (F	P.O. Box Number is Not Acceptable	e)		
					64	City			FL	85 Zip (Code
11. Pursuant office or ragent to	to the provisions of Sections 607 registered agent, or both, in the 3 are familiar with and accept the complete the complete to the complete the com	State of Florida, Suc obligations of, Secti	chichange was on 607.0505, F	authorize Iorida Sta	d by tutes	e-named corporat the corporat of signature requir	ion's k	on submits this statement for the pupper of directors. I hereby accept	rpose of c the appoin	nanging its	s registered registered
12.		AND DIRECTORS		13.	- 6-			ADDITIONS/CHANGES TO OFFIC		IRECTOR	S IN 12
TITLE	PD	* * * * * * * * * * * * * * * * * * *	DELETE	1.1 T	TLE			· ·		Change	Addition
NAM?	BELLINS, JACK			1.2 N							
STREET AUCHESS	8455 S.W. 89 ST. MIAMI FL					ADDRESS					
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NAME				22 N				•	_		
STREET ACORESS				235	TREET	ADDRESS .		•			i
011y - \$1 - 20F				2.40	HTY-S	ST-ZIP					
TITLE			☐ DELETE	3.1 T	TLE				L	_] Change	Addition
NAME				3.2 N							
STEEF LADORESS				1		ADDRESS					
1015 - ST - ZIP			DELETE	3.4. C		ST-ZiP			-	Change	Addition
- NAME			C DECEME	4, 2 8		,			•	T Cumingo	11004151
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CHY-ST-ZiF					ITY-S						
Title			DELETE	6.1 7					T	Change	Addition
NAME) h.			6.2 N			بالدر			-	
STREET ADDRESS						ADDRESS	3.74°	9 .		-	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r). 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 arm 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.