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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # 683823

1. Corporation Name
UNION ELECTRICAL CONTRACTOR, INC.

Principal Place of Business

Mailing Address

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90181 024 ***150.00



Principal Place	e or previese	Maining Address					
2825 S.W. 79TH COURT 2825 S.W. 79TH COU MIAMI FL 33155 MIAMI FL 33155					DO NOT WORK IN THE	00405	
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed		}
}					10/07/1980		
Principal Place of Business 2a. Mailing Address					4. FEI Number	P	pplied For
21	26				59-2039142	N	lot Applicable
	e, Apt. #, etc. Suite, Apt. #, etc.					\$8.75	Additional
22	27				5. Certificate of Status Desired	Fee F	Required
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23	28				Trust Fund Contribution		to Fees
Zip	Country		Zip Country		8. This corporation owes the current year In	tangible	
24	25	29	 '		Personal Property Tax. Yes No		
24	9. Name and Address of Current Registered Agent		1301		10. Name and Address of New Registered	Agent	
	or Italie and Addieso or delicit	t regioto.ee Age	8	1 Name			
RUD	Z, JOSE D.					·	
2825 S.W. 79TH COURT				82 Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33155			<u>-</u>				
IAIIV	WII 1 E 35 155		8	3			Ì
			8	4 City		85 Zip	Code
			ا	3,10	FL	. " - "	
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statu	tes, the abo	ve-named corp	poration submits this statement for the purpose of	changing it	s registered
l office or r	egistered agent, or both, in the State :	of Florida. Such change was a	authorized b	v the corporati	ion's board of directors. I hereby accept the appo	intment as i	egistered
agent. i a	m familiar with, and accept the obligation	tions of, Section 607.0505, Fit	onua Siaiule	55.		•	
SIGNATURE	Signature, typed or printed name of registered agen	t d till - d policeble (NOT)	F. Bogistared Ac	oot elegature recitir	red when reinstating) DATE		<u> </u>
12.		D DIRECTORS	13.	Jenit signature requir	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE	DP OF TOLKS AN	DELETE	1.1 TITLE	. 		Change	
	RUIZ, JOSE D.						_
NAME	l '		1.2 NAME				l
STREET ADDRESS	2825 S.W. 79TH COURT		1.3 STRE	ET ADDRESS			
CITY+ST-ZIP	MIAMI FL		1.4 CITY				T Addition
TITLE	<u>.</u>	☐ DELETE	2.1 TITLE	•		☐ Change	e
NAME			2.2 NAME	 			i
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · ·		2,4 CITY	-ST-ZiP			
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NAME			3.2 NAME	.			.
STREET ADDRESS	·			ET ADDRESS	·		\
}							
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TITLE		□ hereie		}		ی داندان	
NAME			4. 2 NAM				
STREET ADDRESS	·		4.3 STRE	ET ADDRESS			}
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	I		Change	e 🔲 Addition
NAME		•	5.2 NAME	■	•		
STREET ADDRESS	• .		5.3 STRE	ET ADDRESS			ľ
CITY-ST-ZIP			5.4 CITY-	-ST-ZIP			
TITLE	<u> </u>	C DELETE	6.1 TITLE	-		☐ Change	Addition
			6.2 NAME	.		_	_ {
NAME				ET ADDRESS			{
STREET ADDRESS							1
CITY-ST-ZIP	,		6.4 CITY	-ST-ZtP		•	

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99 Date

305) 261-1689 Day#ne Phone #