

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

FILED
Jul 28, 1999 8:00 am
Secretary of State

07-28-1999 90014 030 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT

1. Corporation Name *Black Industries, Inc**810773*

6 8 9 8 1 1 - 9 0 0 1 2 - 4 1 *

DO NOT WRITE IN THIS SPACE

Principal Place of Business <i>1200 Landmark Ctr, Ste. 1300 Omaha, NE 68102</i>	Mailing Address <i>1200 Landmark Ctr, Ste. 1300 Omaha, NE 68102</i>
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3. Date incorporated or Qualified

04/25/1973

4. FEI Number

56-0688919

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

8. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. City & State

28. City & State

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name

Edward Pollock

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

Able Telecom Holding Corp.

83. City

1601 Forum Place, Suite 1110

84. City

West Palm Beach

FL

33401

85. Zip Code

33401

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 signature required when reinstating)

DATE

8/15/99

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1. TITLE

1.2. NAME

1.3. STREET ADDRESS

1.4. CITY - ST - ZIP

C/D
Billy V. Ray, Jr
1601 Forum Place, Ste. 1110
West Palm Beach, FL 33401

☒ Change ☐ Addition

2.1. TITLE

2.2. NAME

2.3. STREET ADDRESS

2.4. CITY - ST - ZIP

P
Richard Boyle
1601 Forum Place, Ste. 1110
West Palm Beach, FL 33401

☒ Change ☐ Addition

3.1. TITLE

3.2. NAME

3.3. STREET ADDRESS

3.4. CITY - ST - ZIP

T
Michael Arrp
1601 Forum Place, Ste. 1110
West Palm Beach, FL 33401

☒ Change ☐ Addition

4.1. TITLE

4.2. NAME

4.3. STREET ADDRESS

4.4. CITY - ST - ZIP

S
Elizabeth Terrero
1601 Forum Place, Ste. 1110
West Palm Beach, FL 33401

☒ Change ☐ Addition

5.1. TITLE

5.2. NAME

5.3. STREET ADDRESS

5.4. CITY - ST - ZIP

☐ Change ☐ Addition

6.1. TITLE

6.2. NAME

6.3. STREET ADDRESS

6.4. CITY - ST - ZIP

☐ Change ☐ Addition

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/16/99

Date

56-688-0400

Daytime Phone #