

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 846659 (1)

1. Corporation Name

ROBINSON ELECTRICAL COMPANY, INC.



Principal Place of Business

100 NE 21 ST
MIAMI FL 33137
US

Mailing Address

100 NE 21 ST
MIAMI FL 33137
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

ROBINSON, BURNELL D
23 SW 23 RD
MIAMI FL 33129

3. Date Incorporated or Qualified

08/05/1980

3a. Date of Last Report

01/20/1995

4. FEI Number

72-0696106

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

10. Name and Address of New Registered Agent

81 Name

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

100 NE 21 Street

84 City

MIAMI

FL

85 Zip Code

33137

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

Burnell D. Robinson

Burnell D. Robinson, Pres

4-10-96

12. OFFICERS AND DIRECTORS

TITLE PCD
NAME ROBINSON, BURNELL D
STREET ADDRESS 23 SW 23 RD
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE VPD
NAME ROBINSON, TODD
STREET ADDRESS 23 SW 23 RD
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE STD
NAME ROBINSON, KIMBERLY
STREET ADDRESS 1717 N BAYSHORE DR #1042
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS 100 NE. 21 Street
14 CITY-ST-ZIP MIAMI, FL 33137 ☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS 100 N.E. 21 Street
24 CITY-ST-ZIP MIAMI, FL 33137 ☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS 100 N.E. 21 Street
34 CITY-ST-ZIP MIAMI, FL 33137 ☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

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 if changed. I attach attachment with an address.

SIGNATURE:

Kimberly A. Robinson, Kimberly A. Robinson, 4-10-96 (305) 593-8334

CR2E034 (12/95)