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

1. Corporatio	MENT # 85310 IT ELECTRIC INC.	9 (7)		T (ABIA) JAIST BURA HIRL HAH BA	ISĀ Jāli siāsi asāli diāsi diāsi alak asak kar
Principal Place of Business 313 WEST GIRARD MADISON HEIGHTS MI 48071 US		Mailing Address 313 WEST GIRARD MADISON HEIGHTS MI 48071 US			
				 Date Incorporated or Qualified 06/09/1982 	3a. Date of Last Report 04/04/1995
2. Principal Pt 21	ace of Business	2a. Mailing Address 26 850 STEPHE	NSON HWY	4. FEI Number 38-1884765	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	9	27 SUITE 115 City & State			Fee Required
23		28 TROY, MICH	IGAN	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation has liability for	Added to Fees intangible tax under s 199,032
24	25 9. Name and Address of Current	[29] 48083	30 USA		□No
8900 W	JOHN A. /ASHINGTON BLVD., H.T. 103A OKE PINES FL 33025		 81 Name 82 Street Addr 83 84 City 	ess (P.O. Box Number is Not Acceptab	FL 85 Zip Code
familiar wit	o the provisions of Sections 607,0502 a ed agent, or both, in the State of Florida h, and accept the obligations of, Sectio Signature, typod or prints a name of registered agent a OFFICEIRS AND	n 607.0505, Florida Statutes utrio fapplicable (NC	ed by the corporation's boar by the Registered Agent signature recurses 13.	d of directors. Thereby accept the appoint	Dintment as registered agent. I am
THILE	D	DELETE	1 1 TITLE	ADDITIONS/CHANGES TO OFFI	······································
NAME	CONTI, JOHN A.		1.2 NAME		Change Addition
STREET ADDRESS	313 WEST GIRARD		1.3 STREET ADDRESS		
CITY-ST-ZIP	MADISON HEIGHTS MI		1.4 CITY - ST - ZIP		
TITLE NAME	P Conti-duhaime, Amanda	DELETE	2 1 TITLE		Change Addition
STREET ADDRESS CITY-ST-ZIP	313 WEST GIRARD MADISON HEIGHTS MI		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		
TITLE	VP	☐ DELETE	3 1 TITLE		Change Addition
NAME CTREET ADDRESS	JUERGENS, H. MICHAEL 313 WEST GIRARD		3.2 NAME		
STREET ADDRESS City-St-Zip	MADISON HEIGHTS MI		3.3. STREET ADDRESS		
TITLE	ST ST	DELETE	3 4 CITY-ST-ZIP		
NAME	CONTI, ANDREW		4.1 Title 4.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	313 WEST GIRARD		4.3 STREET ADDRESS		
CITY-ST-ZIP	MADISON HEIGHTS FL		4.4 CHY-ST-ZIP		
TITLE		DELETE	5. 1 TIFLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		DE DE	5.4 CITY - S1 - ZIP		
TITLE		☐ DELE1€	6 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			6.3 STREET ADDRESS		
4. I do hereby	certify that the information supplied with he information indicated on this annual	this filing is voluntarily furnis	64 CITY-ST-ZIP shed and does not qualify for	the exemption stated in Section 110.0	7(3)(k) Florida Statiston 1 & when

SIGNATURE:

certify that the information indicated on this annual report or supelemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 inchanged, or on an attachment with an address.

IGNATURE:

| Signature and type or private in proper or supelemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 inchanged, or on an attachment with an address.

| GNATURE: | 430-96 | 810-585-3635 |
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