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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	No. of the Control of		etary of Stale IF CORPORAT	ONS				
DOCU 1. Corporation	MENT # F	04577	(5)						
PETER	R H. JACK ELECTI	RIC, INC.					1188 lill 84111 8484 dive 184		
Principal Place	a of Rusinase		Address						
			ig Address						
P.O. BOX 66	L RUN DRIVE		04 Ouail Run di 1. Box 665	RIVE					
JUPITER FL			TER FL 33458			<u></u>			
US		U\$				I	corporated or Qualified		e of Last Report
2. Principal Place of Business			a. Maing Address				6/1980		8/01/1995
H)			1			4. FET Nur	·2042774		Applied For
Suite, Apt.	#, etc.		nte, Apt. #, etc.						Not Applicable \$8.75 Additional
22		27				b. Certifica	ite of Status Desired		Fee Required
City & State	e	Ci	ty & State			6. Election	Campaign Financing		\$5.00 May Be
23		28				Trust Fu	ınd Contribution	LJ	Added to Fees
Ζιρ 24	Countre 25	r · 1	p	Countr	ŕ	I	poration has liability for		ax under s. 199.032,
<u> </u>		29 ess of Current Register	ed Anent	30		Florida :		s ∐No	
				81	Name	iu. Name a	and Address of New	Registered	Agent
JACK P	PETER H.				}				
	QUAIL RUN DR.			82	Street Add	dress (P.O. Box f	Number is Not Accepta	ble)	
	R FL 33458			83	<u>†</u>			·	
				723	ļ .				
				84	City			FL	85 Zip Code
11. Pursuant t	to the provisions of Section	ons 607.0502 and 607.1	508, Florida Statu	tes, the above-	ued corpo	oration submits th	is statement for the pu		
familiar wit	red agent, or born, in the ith, and accept the obliga	State of Florida, Such ch tions of, Section 607 050	lange was authen 15, Florida Statute	zed by the corps	ioration's bo	lard of directors. I	hereby accept the app	pointment as	registered agent. Lam
SIGNATURE									
12.		ofreg seen a post and stort accor		the fourteen Ap	d signal in long in			TWIE	
TIFLE	T PD	FLICERS AND DIRECTO	DELETE	13.		ADDITIC	NS/CHANGES TO OF		<u></u>
NAME	JACK, PETER H.		□ nerese	1 1 Talk F					Change Addition
STREET ADORESS	18404 QUAIL RUN	ם חו		1.2 NAME					
City - St - Zi2	JUPITER FL	1 DII.			ADDRESS				
TITLE	ST		DELETE	1.4 City 2.1 TITLE	51 - ZIP				Changa
NAME	JACK, SHARON S	.		2.2 NAME				ι	Change Addition
STREET ADDRESS	18404 QUAIL RUN				ADDRESS				
CITY - S1 - ZIP	JUPITER FL			24 CITY - 1					
TITLE		** ·····	DELETE	3 1 117 LE			., .,	1	Change Addition
NAME				3.2 NAME				•	
STREET ADDRESS				3.3 STREE	I ADDRESS				
CITY - ST - ZIP	ļ			3.4 City - 5	31 21F				
TITLE			DELETE	4 1 TILE				{	Crange Addition
NAME				4.2 NAME	1				
STREET ADDRESS				4.3 STREE	ADDRESS				
CITY-ST-ZIP			C District	4.4 City - 5	T · ZIP				
TITLE			DELETE	5 1 THILE				(Change Addition
NAME CIRCLY ADDRESS				5.2 NAME					
STREET ADDRESS				5.3 STREET					
DITY-ST-ZIP TITLE	 		DELETE	5.4 C/TY - S	1 - ZiP				7.05
NAME				6 1 TILE				Ĺ	Change Addition
i				6.2 NAM6	Annors				
STREET ADORESS				6.3 STREET	i				

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 by this annual report or supplemental impact report is true and accurate and that my signature shall have the same logal effect as if made under bath, that I am an officer or pirector of the corporation or the receiver or fursible in powered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Brock 12 or Brock 13 if organized, in on an attachment with an advises.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/14/96 (561)747-0378