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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

	1996	1.32	DIVIDION	CORPORATI					
1. Corporation		98	(6)						
DUVA	L ELECTRICAL CO., INC.					4 1884/80 1/10 04/64 00/00 1/0		I BIRK BIRK BIRK BIR	I fil i deni ina.
Principal Place	of Business		ng Address						
115 GREEN			IS GREEN ST						
PO BOX 10	89	P	O BOX 1089						
CALLAHAN			ALLAHAN FL 32011			3. Date incorporated or Quali 01/05/1982	fied 3a	Date of Last Re 03/09/19	95
 Principal Pla 	ace of Business	2a. M	Mailing Address			4. FEI Number 59-2154949			Applied For Not Applicable
Suite, Apt. i	#, etc.		iuite, Apt. #, etc.			5. Certificate of Status Desire	۸	\$8.75	Additional
2]		27				5. Certificate of Status Desire			Required
Orty & State	,	28	City & State			6. Election Campaign Financia Trust Fund Contribution	ng 🗆		O May Be d to Fees
2 - Zip	Country		ip	Country		8. This corporation has liability	y for intan		
4	25	29		30			Yes 🔲	~	, , , , , , , , , , , , , , , , , , , ,
	g, Name and Address of Curre	ent Register	red Agent		7	10. Name and Address of N	ew Regis	tered Agent	
01DT5	D 7101110 D			81	Name				
	r, thomas d Box 1880			82	Street Add	dress (P.O. Box Number is Not Acor	eptable)		
	HAN FL 32011			83					
ONLUN	INITIE OCUTI					······································			
				84	City			FL 85 Zi	p Code
	Journal of Sections of Sections bur Jubi			- 11					
or register familiar wit	ed agent, or both, in the State of Flo in, and accept the obligations of, Se	orida. Such d	hange was authorize	ed by the com	named corpo poration's boo	oration submits this statement for th ard of directors. I hereby accept the	e purpose appointm	e of changing its r nent as registered	egistered office Lagent. Lam
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certify trial 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 attachinegt with an address.

SIGNATURE: SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

CR2E034 (12/95)