

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

DOCUMENT # **G53252** (4)  
1. Corporation Name  
**ELECTRIC LINE ASSOCIATES, INC.**



Principal Place of Business

**3949 S.W. 12TH COURT  
FT. LAUDERDALE FL 33312**

Mailing Address

**3949 S.W. 12TH COURT  
FT. LAUDERDALE FL 33312**

3. Date Incorporated or Qualified <b>08/08/1983</b>	3a. Date of Last Report <b>03/20/1995</b>
4. FEI Number <b>59-2308543</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**FEIGENBAUM, MARTHA  
125 CRAWFORD BLVD  
BOCA RATON FL 33433**

10. Name and Address of New Registered Agent

81. Name <b>SANDRA KATULKA</b>	85. Zip Code <b>FL</b>
82. Street Address (P.O. Box Number is Not Acceptable) <b>3949 S.W. 12TH CT.</b>	
83. City <b>FT. LAUDERDALE, FL 33312</b>	
84. City	

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: *Sandra Katulka* **SANDRA KATULKA, PRES** **3-18-96**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>V. PRES.</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>KATULKA, SANDRA</b>		1.2 NAME <b>PATRICK KATULKA</b>	
STREET ADDRESS <b>3949 S.W. 12TH COURT</b>		1.3 STREET ADDRESS <b>3949 S.W. 12TH CT.</b>	
CITY-ST-ZIP <b>FT. LAUDERDALE FL</b>		1.4 CITY-ST-ZIP <b>FT. LAUDERDALE, FL 33312</b>	
TITLE <b>ST</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KATULKA, MICHAEL</b>		2.2 NAME	
STREET ADDRESS <b>3949 S.W. 12TH CT.</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>FT. LAUDERDALE FL</b>		2.4 CITY-ST-ZIP	
TITLE <b>V I</b>	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, or on an attachment with an address

SIGNATURE: *Sandra Katulka, PRES* **SANDRA KATULKA, PRES. (954) 584-1642**  
Signature and typed or printed name of signing officer or director

CR2E034 (12/95)