

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G61850 (5)

1. Corporation Name

BLAIS ELECTRIC, INC.

Principal Place of Business

652 OLD DIXIE HIGHWAY
VERO BCH FL 32962

Mailing Address

652 OLD DIXIE HIGHWAY
VERO BCH FL 32962



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	1056 Old Dixie Hwy	26	1056 Old Dixie Hwy	09/30/1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				59-2329920	
22		27		5. Certificate of Status Desired	
City & State		City & State		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Vero Beach, FL		28 Vero Beach, FL		6. Election Campaign Financing	
Zip		Zip		Trust Fund Contribution	
32960		32960		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation owes or has paid the current year Intangible	
Country		Country		Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BLAIS, BRYAN D.
4055 11TH PLACE SW
VERO BEACH FL 32962

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAIS, BRYAN D	1.2 NAME	
STREET ADDRESS	2060 14TH ST, SW	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH, FL 00000	1.4 CITY-ST-ZIP	
TITLE	DS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAIS, DIANE S	2.2 NAME	
STREET ADDRESS	2060 14TH ST, SW	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH, FL 00000	2.4 CITY-ST-ZIP	
TITLE		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		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		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		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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E034 (10/97)

11/12/98 536519 2197