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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # H08936

1. Corporation Name

JOHN SCOTT ELECTRICAL SERVICES, INC.

Principal Place of Business % JOHN E. SCOTT. JR. 2187 GABRIEL LANE WEST PALM BEACH FL 33406 Mailing Address

% JOHN E. SCOTT. JR. 2187 GABRIEL LANE

WEST PALM BEACH FL 33406

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90049 047 ***150.00



DO NOT WRITE IN 1	THIS	SPAC
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2 Date Incorporated or Qualifed

					06/18/1984				
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number	A	pplied For		
21		26			59-2426624	T	lot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional		
22		27			5. Certificate of Glatos Desired	Fee F	Required		
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees		
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Inta	ngible	\ \ \ \		
24	25	29	30		Personal Property Tax.	Yes	No		
1	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered A	gent			
				81 Name					
SCOTT, JOHN E., JR.			82 Street Address (D.O. Poy Number is Not Acceptable)						
2187 GABRIEL LANE			82 Street Address (P.O. Box Number is Not Acceptable)						
WES	T PALM BEACH FL 33406			83					
	•					11	0-1-		
				84 City	FL	85 Zip	Code		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was a	uthorized	by the comorat	poration submits this statement for the purpose of cition's board of directors. I hereby accept the appoint	hanging i	ts registered registered		
SIGNATURE	Signature, typed or printed name of registered ager			Agent signature requir	red when reinstating) DATE				
42		D DIRECTORS	13.	rigent agriculture requi	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12		
12.	DP OFFICERS AN	DELETE	1.1 717	ne l	Abbittottofoliations to of the little tall	Change			
TITLE	SCOTT, JOHN E., JR.		1.2 NA			_ `	_		
NAME									
STREET ADDRESS	2187 GABRIEL LANE			REET ADDRESS	•				
CITY-ST-ZIP	WEST PALM BEACH FL	□ DELETE		TY-ST-ZIP	<u></u>	Change	Addition		
TITLE	ST	□ DEFE IE	2.1 TIT			C onding.			
NAME *	SCOTT, JUDITH A		2.2 NA	1					
STREET ADDRESS	2187 GABRIEL LANE		2.3 ST	REET ADDRESS	•				
CITY+ST-ZIP	WEST PALM BEACH FL			TY-ST-ZIP	<u> </u>		- Addition		
TITLE		☐ DELETE	3.1 ₮1		•	☐ Change	Addition		
NAME			3.2 NA	WE					
STREET ADDRESS			3.3 ST	REET ADDRESS					
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP					
TITLE		☐ DELETE	4.1 TFI	n.e.		☐ Change	Addition		
NAME			4,2 N	AME					
STREET ADDRESS			4.3 ST	REET ADDRESS					
CITY-ST-ZIP			4.4 CF	TY-ST-ZIP					
TITLE		☐ DELETE	5.1 TII	n.e		☐ Change	Addition		
NAME	· .		5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRESS			•		
CITY-ST-ZIP			5.4 CF	TY-ST-Z!P					
TITLE		☐ DELETE	6.1 TR	TLE		☐ Change	Addition		
NAME			6.2 NA	WE					
STREET ADDRESS			6.3 ST	REET ADDRESS					
i				TY-ST-ZIP					
CITY+ST+ZIP	I '		4.7 07						

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 20,1999

1-561-586-4216

Daytime Phone

R2F034 (11/98)