1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H37136

RIMER ELECTRIC CORPORATION

FILED Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90029 015 ***150.00



Principal Place	e of Business	Mailing Address						
223 PEREGRINE	E DR.	P. O. BOX 033157						
INDIATLANTIC F	FL 32903	INDIALANTIC FL 32903			DO NOT MIDITE IN	THIS SDACE		
us		US			DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualifed			
		1			01/04/1985		Annthad	
2. Principal Pt	lace of Business	2a. Mailing Address		-x -	4. FEI Number	. 2 -	Applied	
21 2287	Venetta Place	26			59-2494920	<u>+0</u> -	Not App	
Suite, Apt. :	#, efc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	•	75 Addition • Require	
22		27					<u> </u>	
City & State	en +	City & State			6. Election Campaign Financing		.00 May	
23 MALA	lance Il pero	28			Trust Fund Contribution		ded to Fee	:5
Zip	Country	Zip _	_ Coun	try	8. This corporation owes the current ye	ar Intangible Yes	□Ne	,
24 0740	1) 25 Sevard		30		Personal Property Tax.			'
	9. Name and Address of Curren	t Registered Agent		04 Name	10. Name and Address of New Regist	ered Agent		
VAV	R. RIMER			81 Name				
i e			1	82 Street Add	iress (P.O. Box Number is Not Acceptable)			
	PEREGRINE DR		L					
INDIA	ATLANTIC FL 32903		1	83				
			<u> </u>	84 City		85	Zip Code	
				'		FL;	•	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the ab	ove-named corp	poration submits this statement for the purpo	se of changir	g its regis	tered
	egistered agent, or both, in the State m.familiar_with, and accept the obligation				ion's board of directors. I hereby accept the	арролипени	as register	eu
SIGNATURE								i i
			Januarand A	aget signature coougr	red when reinstating) DA	TE		
	Signature, typed or printed name of registered ager			Agent signature requir	do when to home any	TE RS AND DIRE	CTORS II	N 12
12.	OFFICERS AN	ID DIRECTORS	13.		red when reinstating) DA ADDITIONS/CHANGES TO OFFICER			N 12
12.	OFFICERS AN		13.	.E	do when to home any	RS AND DIRE		
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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 eceiver 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: