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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H48265

(3)

Mailing Address

MOORE ELECTRICAL SALES, INC.

FILED
May 13 1997 8:00am
Secretary of State



BISO GREAT OAKS LANE ORIANDO FL 82808			3120 GREAT OAKS LANE ORLANDO FL 32806-8525						
						3. Date Incorporated or Qualified 03/18/1985	3a. Date o		eport
2. Principal Pl	ace of Business	2a. Mailing Addre	2s. Mailing Address			4. FEI Number	T AA1A 11		plied For
21		26	26			59-2534320			t Applicable
Suite, Apt. (#. etc.		Suite, Apt. #, etc.				rn \$	8.75 /	Additional
22		27	27			5. Certificate of Status Desired	□ 3	Fee Re	
City & State)	City & State				6. Election Campaign Financing		5.00	May Be
23		28	28			Trust Fund Contribution		Added to	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for in	ntangible tax	under s.	199.032.
24	26	29	30				Yes □ N		,
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				nt	
WAR	LICK, THOMAS H.			81	Name				
316 (e. Pi ne st.		82 Street Add		dress (P.O. Box Number is Not Acceptable)				
ORU	ANDO FL 32801		83				.,,		
	:		:	84	City		FL ⁸	Zip (Code
11. Pursuant totice or re abent. I ar SIGNATURE	to the provisions of Sections 607. agistered agent, or both, in the S m familiar with, and accept the of	0502 and 607.1508, Florida tate of Florida. Such chang bligations of, Section 607.0				poration submits this statement for the pution's board of directors. I hereby accep	urpose of cha t the appoint	nging its nent as	s registered registered
	Signature, typed or printed name of registere			l Age	r. signature requi	ired when reinstating)	DATE		'
12,		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	OP .	☐ DEŁ	1				لسا	Change	Addition
NAME :	The state of the contract of t		1.2 N						
STREET ADDRESS			1.3 S		ADORESS				
CITY-ST-ZIP			1.4 City-5		- ZIP				
TILE TO		∐ DEL	☐ DELETE 2.1 TI					Change	Addition
NAME			2.2 N						
STREET ADDRESS			2.3 5		ADDRESS				
CITY-ST-ZIP			2 4 CITY-ST-ZIP						
Time 4	TLE 30			3.1 TITLE				Change	☐ Addition
NAME #			3.2 N/	AME					İ
STREET ADDRESS	ar .		3.3 S1	HEET A	ADDRESS				
CITY-ST-ZIP	14		3.4. 0	ITY-S	T-ZIP				
Aut 🚡	7	☐ DEL	ETE 4.1 TI	TLE				Change	Addition
NAME !			4. 2 N	AME					
STREET ADDRESS			4,3 ST	REET A	ADDRESS				
CITY-ST-ZIP			4.4 CI	TY- \$1	1 - ZIP				
MILE S	DELETE 5.1			TLE				Change	Addition
NAME **	Þ,		5.2 N/	AME					
STREET DORESS	<u> </u>		5.3 \$1	REET A	ADDRESS				
CHY-ST-ZIP	- -		5 4 CI	1Y - ST	r- ZIP				
TITLE &								Change	Addition
NAME #	i. •	-	6.2 N/						
STREET ADDRESS			i i		ADDRESS				
OITY ST-ZIP	16			TY-SI					
	by partify that the information sup	inlied with this filing does n				ed in Section 119.07(3)(i). Florida Statutes	s. I further ce	dify that	the

To never be detailed in section 119 to 1899 and the time receiver of the time certail 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 it is 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 address.

N.F (/-

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