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**PROFIT** CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Feb 21 1997 8:00am

•	1997		DIVISION OF CORPOR		ATIONS		Secretary of State					
DOCUMENT # J04567 (0) L & L ELECTRIC OF TAMPA, INC.									) <b>(18) (18)</b>		<b>818</b> 11 1 <b>18</b> 1	
Principal Place	of Rusiness		Mailing A	ddraee			· · · · · · · · · · · · · · · · · · ·					
Principal Place of Business 5130 LETOURNEAU TAMPA FL 33610 US			Mailing Address 5130 LETOURNEAU CIR. TAMPA FL 33610-5315 US		:							
00			•			:		Date Incorporated or Qualified     03/18/1986	7	ate of Last R 09/1996	eport	]
·	ace of Business			g Address				4. FEI Number			plied For	-
Suite Apt.	#, etc.		26 Suite.	Apt. #, etc.				59-2649953	····	\$8.75 A	t Applicable	+
22			27			1:		5. Certificate of Status Desired		Fee Re		
City & State	0		├ı ´	State				6. Election Campaign Financing	[""]	\$5.00		]
23 Zip		Country	28 Zip		T Ca	try		Trust Fund Contribution  8. This corporation has liability to	, intendible	Added t	·····	┨
24	25	,	29		30					No No	199.032,	
	9, Name and	Address of Current	Registered /	Agent				10. Name and Address of New R	egistered	Agent		1
LIND	SAY, MICHAEL	J.				31 N	me					]
12326 LANGSHAW DR						2 St	eet Addre	ss (P.O. Box Number is Not Accepte	ible)			1
THO	notosassa f	L 33592				<u></u>					***	4
						4 Ci	ly	·	FI	85 Zip (	Code	1
11. Pursuant 1	to the provisions	of Sections 607.0502	and 607 150	8 Florida Statu	ies the	ve-ñai	ned corpo	vation submits this statement for the	w 191	ohanging it	s registered :	
office or re	egistered agent,	or both, in the State o nd accept the obligat	of Florida, Suc	ch change was	authori	by the	corporation	oration submits this statement for the on's board of directors. I hereby acc	ept the ap	oointment as	registered	1
SIGNATURE.	Transfer transfer	a doope in o obliga		011 001 .0000, 11								
	Signature Typed or pri	ced name of registered agen			TE: Regist	vjert sig	nature require	d when reinstating)	DATE			_ إ
12.	DOY	OFFICERS AND	DIRECTORS	DELETE	15		<del></del>	ADDITIONS/CHANGES TO OFF	CERS AN	DIRECTOR Change	S IN 12 Addition	96/6
TITLE NAME	PST LINDSAY, MIC	MACI I		TT DEFETE	1.1	Æ .				CT Charge	L_ Mannon	
STREET ADDRESS	12326 LANGS				1.2	EET ADDF	1588					8
CITY-S1-ZIP	THONOTOSA				1.4	Y-ST-ZIP						CR2E034
TITLE	CV			DELETE	2.1	Ė				Change	Addition	]ប
NAME	LETOURNEAL	J, REGGIE D.			2.2	ME			:			
STREET ADDRESS	1218 CRYDO				2.8	REET ADDE	ESS	0	1			
CITY - S1 - ZIP	BRANDON FL				2.4	1Y-81-20	·					⇃
TITLE				DELETE	3.1	LE				Change	Addition Addition	
NAME				•	3.21	1			1.1			
STREET ADDRESS						HEET ADOF						
CITY-ST-ZIP TITLE				DELETE		TY - \$T - ZH	<u></u>			Change	Addition	1
NAME				E becer	4.2			( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )				
STREET ADDRESS					1	reet addi	RESS	· 9:				
CITY-ST-ZIP						TY-ST-2#						
TITLE				DELETE	5.11			:		Change	Addition	
NAME					5.2	ME		* * * * * * * * * * * * * * * * * * *				'
STREET ADDRESS					5.3 8	REET ADD	RESS					
CHTY-ST-ZIP				17 66. 646		TV-ST-ZIF				Chann	Addition	4
TIPLE				DELETE	6.1·T					Change	Addition	
NAME					6.2 N		acec					
STREET ADDRESS					1	REET ADD						
CITY - ST - ZIP					6.4 C	TY-ST-ZIF						-

14. I do hereby certify that the information supplied with this filling 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. 8A-621-4/64