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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 28 1997 8:00am Secretary of State

DOCUMENT # <b>J23431</b> 1. Corporation Name  Q.E.C. ELECTRIC, INC.						i Mili Addi Dali Ali		
Principal Place of Business 112 VIRGINIA AVE. COGOA FL 32922		Mailing Address 112 VIRGINIA AVE. COCOA FL 32922-8634			I BIBIT DIBIT BIBIT BED	RA DADAR DIA	0))	
					3. Date Incorporated or Qualified 07/08/1986	3a. Date of 03/14/19		porl
2. Principal	Place of Business	2a. Mailing Address	S		4. FEI Number			lied For
21	L. H. A.L.	26 Culto Apt # ot			59-2698147	<u> </u>		Applicable
Suite Apt	t #, EtC.	Suite, Apt. #, etc	C.		5. Certificate of Status Desired		1 <b>.75</b> Ad Fee Req	
City & Sta	ate	City & State	<del></del>	·	6. Election Campaign Financing		5.00 N	
3	and the second s	28			Trust Fund Contribution		dded to	Fees
Ζφ <b>4</b>	Country	Z <sub>1</sub> p	30 Co.	untry	This corporation has liability for Florida Statutes	intangible tax u ☐ Yes ☐ No		199.032,
41	25   9, Name and Address of Cur		[30]	1	10. Name and Address of New Ro			
SCI	HNEIBLE, ROBERT R.			81 Name				
	ELLIOTT DRIVE		82 Street Ac		dress (P.O. Box Number is Not Accepta	ble)		····
ME	RRITT ISLAND FL 32952			83		·		
				B4 City		FL 85	Zip C	ode
					rporation submits this statement for the ation's board of directors. I hereby acce		ent as re	egistered
SIGNATURE	Signarine Agreed or printed name of registrates	d agent and title if applicable. AND DIRECTORS	(NOTE Ragisters	ed Agent signature requ		DATE CERS AND DIRE	ECTORS	
SIGNATURE 12.	Sugner we represt or printed name of registered	gagent and title II applicable.	(NOTE Registers 13.	ed Agent signature requ	ured when reinstating)	DATE CERS AND DIRE		S IN 12
SIGNATURE 12. TIILE NAME	OFFICERS  PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE	d agent and title if applicable. AND DIRECTORS	(NOTE Registers  13. TE 1.1 T 12 N	ed Agent signature requ	ured when reinstating)	DATE CERS AND DIRE	ECTORS	S IN 12
SIGNATURE  11.  11ILE  NAME  STREET ADDRESS  CULY- ST. ZIE	Signal in Special printed trans of registrate OFFICERS  PVST SCHNEIBLE, ROBERT R.	Jagest and title II applicable AND DIRECTORS DELET	(NOTE Registers  13. IE 1.17 12.N 1.3.8 1.4.6	ed Agent eignature required.  ITLE  JAME  STREET ADDRESS  CITY - ST - ZIP	ured when reinstating)	DATE CERS AND DIRE	ECTORS hange	S IN 12
SIGNATURE  12.  THE  NAME  STREET ADDRESS  CUY-SL ZIP	OFFICERS  PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE	d agent and title if applicable. AND DIRECTORS	(NOTE Registers  13. IE 1.17 12. 1.3.5 1.4.0 TE 2.17	ed Agent eignature requirite UTILE UAME STREET ADDRESS CITY-ST-ZIP	ured when reinstating)	DATE CERS AND DIRE	ECTORS	S IN 12
SIGNATURE TITLE HAME STREET ADDRESS CULY-SI ZII- TITLE NAME	PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE MERRITT ISLAND FL	Jagest and title II applicable AND DIRECTORS DELET	(NOTE Fiopislare  13. TE 1.11 12. 13. 14.0 TE 2.11 22.4	TILE  LAME  STREET ADDRESS  SITY-ST-ZIP  TIRLE  LAME	ured when reinstating)	DATE CERS AND DIRE	ECTORS hange	S IN 12
SIGNATURE  11.  THE  NAME  SIRET ADDRESS  THE  NAME  STREET ADDRESS	PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE MERRITT ISLAND FL	Jagest and title II applicable AND DIRECTORS DELET	(NOTE Flogistere  13. TE 1.11 12. 1.35 1.4.0 TE 2.11 22.4 2.35	ed Agent eignature requirite UTILE UAME STREET ADDRESS CITY-ST-ZIP	ured when reinstating)	DATE CERS AND DIRE	ECTORS hange	S IN 12
SIGNATURE  12.  THE  NAME  SIREE LAUDRESS  CUY-SI ZIP  THE  NAME  STREET ADDRESS  GHY-SI-ZIP	PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE MERRITT ISLAND FL	Jagest and title II applicable AND DIRECTORS DELET	(NOTE Figgisters) 13. IE 1.1T 12. 1.3S 1.4.0 TE 2.1T 22.6 2.3S 2.41	ITILE  JAME STREET ADDRESS LITY-ST-ZIP  ITILE  JAME STREET ADDRESS CITY-ST-ZIP	ured when reinstating)	DATE CERS AND DIRE CERS AND DIRE C	ECTORS hange	Addition
SIGNATURE  12.  THE  NAME  SIREFEADDRESS  GUY-SEZIP  THE  NAME  STREEF ADDRESS  GUY-SEZIP  THE  NAME	OFFICERS  PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE MERRITT ISLAND FL.	Jagen and tille il applicable. AND DIRECTORS  DELEI  DELEI	(NOTE Fiogisters) 13. TE 1.11 12. 1.38 1.4.0 TE 2.17 2.2. 2.3. 2.4. TE 311 3.2.	ITLE  LAME STREET ADDRESS CITY-ST-ZIP  LITLE  LAME STREET ADDRESS CITY-ST-ZIP  LITLE LAME STREET ADDRESS CITY-ST-ZIP LITLE LAME LAME LAME LAME LAME LAME LAME LA	ured when reinstating)	DATE CERS AND DIRE CERS AND DIRE C	ECTORS hange hange	Addition
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SIGNATURE  12.  THE  NAME STREET ADDRESS CULY- ST- ZIP  THE  NAME STREET ADDRESS CHY- ST- ZIP  THE  NAME STREET ADDRESS CITY- ST- ZIP  TITTE  NAME	OFFICERS  PVST SCHNEIBLE, ROBERT R. 525 ELLIOTT DRIVE MERRITT ISLAND FL.	agent and tale II applicative.  AND DIRECTORS  DELET  DELET  DELET	(NOTE Figgisters)  13. TE 1.11 12. 1.38 1.40 TE 2.11 2.24 2.33 2.44 TE 311 3.24 3.38 3.4. TE 4.11	ITLE  JAME STREET ADDRESS CITY-ST-ZIP  UTLE  JAME STREET ADDRESS CITY-ST-ZIP	ured when reinstating)	DATE  CERS AND DIRE  C  C	ECTORS hange thange	Addition  Addition
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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 or larn an officer or director of the corporation or the receiver or frustee 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.

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