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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90073 007 \*\*\*150.00

## DOCUMENT # J30962

1. Corporation Name

GOODY'S ELECTRONIC INSTALLATIONS, INC.

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Principal Place		Mailing Address		I 1981116 bibs titti 25116 (8118 bitto trat arett elett eratt eratt eratt	
2778 N. UNIVER	RSITY DR	2778 N. UNIVERSITY DR.		7.	
SUNRISE FL 33322 SUNRISE FL 33322				DO MOT WEITE IN THE ORACE	
US US			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed 08/28/1986	
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number Applied F	
21		26		59-2762246 Not Appli	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required	
22		27		T de riequired	
City & State	te	City & State		6. Election Campaign Financing 55.00 May B	
23				Trust Fund Contribution Added to Fees	<u> </u>
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	
24	25	29 3	<u> </u>	Personal Property Tax. ☐ Yes ☐ No	
<u></u>	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent	
	10 INDOLL 1		. 81 Name	,*	
	IS, MYRON A		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	B N. UNIVERSITY DR				
SUN	irise fl 33322		83	•	
			84 City	85 Zip Code	
			111	<b>FL</b>	
office of t	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the object	of Florida, Such change was aut	norized by the comorati	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as registere	ereu ed
agent. ru	Whiten it is			4//2/99.	.
SIGNATURE	Nunon 4 10	was SR. Pre	sident.	red when reinstating)  A/12/99, -= -	<u>.                                    </u>
SIGNATURE	Signature, typed or printed name of registered ago	ent and title if applicable. (NOTE: F	SideNT. Registered Agent signature require		12
SIGNATURE	Signature, yped or printed name of registered age	was SR. Pre	sident.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12 Addition
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CITY-ST-ZIP 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 chapter 607, or on an attachment with an address, with all other like empowered.