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

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

**FILED** Mar 23 1998 8:00am PROFIT ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J36986 (4) SHORELINE ELECTRIC, INC. Principal Place of Business Mailing Address 1352 SW 1 ST WAY 1352 SW 1 ST WAY DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/08/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0325272 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes 29 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name GILBERT, DAVID W. **824 NE 4TH ST** Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33441** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with an accept the obligation of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE GILBERT, DAVID W. 1.2 NAME NAME **824 NE 4TH ST** 1.3 STREET ADDRESS STREET ADDRESS **DEERFIELD BEACH FL 33441** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ Addition TITLE DELETE 6.1 TITLE Change

6.2 NAME

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 furstee 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 one attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP