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

PROFIT CORPORATION ANNUAL REPORT



Secretary of State DIVISION OF CORPORATIONS

1998

!	MENT # J5994 er electrical contrac	` '				HTM BURK BARK SIDN BURN DAR	
Principal Plac	e of Business	Mailing Address			- I DODING BURL BUILD BU	ADII BION QIUN DIDII QIBII IQQI	
320 THOR AVE 426 INLET AVE. S.E.							
UNIT 2 PALM BAY FL 32909					DO NOT WRITE IN THIS	C CDACE	
PALM BAY F US	F 3580a				3. Date Incorporated or Qualified	3 SPACE	
					02/20/1987		
2. Principal P	flace of Business 2a. Mailing Address				4. FEI Number	Applied For	
21	26				59-2776724	Not Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
City 2 Stat	2         27           City & State         City & State			<del></del>		Fee Required	
28 28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		\$5.00 May Be Added to Fees	
Zip			Count	ry	8. This corporation owes or has paid the c	urrent year Intangible	
24	25 29 30				Personal Property Tax due June 30 X Yes No		
9. Name and Address of Current Registered Agent  ADCHED ANGUET 81 Name					10. Name and Address of New Registered	d Agent	
ARCHER, MICHAEL				1 Name			
426 INLET AVE. S.E. PALM BAY FL 32909			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
			8	3			
			8	4 City		. 85 Zip Code	
				L '_	FI		
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 and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature type or printed name of registered agent and the diagnostic (NOTE Registered Agent signature required when reinstating)  DATE							
12.		ND DIRECTORS	13.	gen agrad 6 req	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	PTD	☐ DELETE	1 1 TITLE	- T		☐ Change ☐ Addition	
NAME	ARCHER, MICHAEL A. 128		1.2 NAM	E		);	
STREET ADDRESS	120 1112 1112 12		1.3 STRE	ET ADDRESS		č	
CITY-ST-ZIP				-ST - ZIP	- <u>-</u>		
TITLE	VOS	☐ DELETE	21 TITUE			☐ Change ☐ Addition C	
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CITY-ST-ZIP			5.4 CITY				
TITLE	<del></del>	DELETE	61 TITLE			Change Addition	
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP			64 CITY				
14, I hereby of indicated	certify that the information supplied vi on this appual report or supplement	with this filing does not qualify fo tal annual report is true and acc	or the exemourate and t	iption stated in that my signal	in Section 119.07(3)(i), Florida Statutes. I further of ture shall have the same legal effect as if made i	certify that the information	

officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 12 or Block 13 if changed, or on an attachmen) with an address.

**FILED** 

May 18 1998 8:00am Secretary of State