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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J85639**

(9)PONTE ELECTRIC, INC. Principal Place of Business Mailing Address % BLANCA L. PONTE % BLANCA L. PONTE 1330 N.W. 113 TERR 1330 N.W. 113 TERR MIAMI FL 33167-3658 MIAMI FL 33167 3. Date Incorporated or Qualified 3a. Date of Last Report 07/29/1987 04/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2826460 21 26 Not Applicable Suite, Apt. # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution \Box Added to Fees 23 28 Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PONTE, BLANCA L. 1330 N.W. 113 TER 82 Street **MIAMI FL 33167** 83 R4 Sections 607-662 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the polyamons of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of agent Lanifam ucien SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) 12. OFFICERS AND DIRECTORS 13. D DELETE Change Addition 1.1 TITLE THEF PONTE, LUCIEN J. NAM 1.2 NAME CR2E034 1330 N.W. 113 TER 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 City ST-7(P CHY-ST-ZIP DELETE Change ☐ Addilion THE 2.1 TITLE PONTE, BLANCA L. 2.2 NAME NAV3 1330 N.W. 113 TER 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-7/P DITY - ST Change DELETE Addition TOLE 3.1 TITLE 3.2 NAME NAME 3:3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY - S1 - 7/P Change Addition DELETE 4.1 TITLE 1016 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition __ DELETE 5 1 TITLE THEF 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 54 CITY-ST-ZIP CITY ST-Zir DELETE Change Addition 61 TITLE THILE 6.2 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP City-St-7 ≥

14. I do 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 attachment with an address

SIGNATURE

FILED

Mar 11 1997 8:00am

Secretary of State