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

**PROFIT** CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # K58327

(3)

HERITAGE ELECTRIC, INC.

**FILED** 

Jan 29 1998 8:00am

Secretary of State

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Mailing	~	٨	44	

1344 NORTHEAST JENSEN BEACH BLVD. JENSEN BEACH FL 34957

Principal Place of Business

1344 NORTHEAST JENSEN BEACH BLVD. JENSEN BEACH FL 34957

					DO NOT WRITE IN TRIS SPACE			
					3. Date Incorporated or Qualified 01/13/1989			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number 65-0094159	Applied For Not Applicable		
Suite, Apt	# etc	Suite, Apt. #, etc.				\$8.75 Additional		
22		27			5. Certificate of Status Desired	Fee Required		
City & State	)	City & State		·····	6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the cu	rrent year Intangible		
24	25	29	30			Yes No		
-41	9. Name and Address of Curre		1001		10. Name and Address of New Registered	Agent		
GAI	RBER, WAYNE			81 Name				
206	2 S.W. PRINCE ROAD		+	00 01 14 4	(C.C. Doubleston in that Assembles)			
PORT ST. LUCIE FL 34952				82 Street Add	at Address (P.O. Box Number is Not Acceptable)			
1 01	111 01. 20012 12 04002		ł	83				
				84 City	FL	85 Zip Code		
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State of familiar with, and accept the oblig	e of Elorida. Such change wa	s authorized	i by the corpora	poration submits this statement for the purpose oution's board of directors. I hereby accept the ap	of changing its registered pointment as registered		
alginations ,	Signature, typed or printed name of registered ag	9) oldsoldge it applicable	OTF: Registered	Agent signature requ	ired when reinstating) DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PST	☐ DELETE	1.1 TIT	LE		Change Addition		
NAME	GARBER, WAYNE		1.2 NA	ME				
STREET ADDRESS	2962 SW PRINCE RD.		1.3 ST	REET ADDRESS				
CITY-ST-ZIP	PT. ST. LUCIE FL		1.4 CI	Y-ST-ZIP	<u> </u>			
TITLE		☐ DELETE	2.1 TIT	LE		Change Addition		
NAME			2.2 NA	ME				
STREET ADDRESS			2.3 ST	REET ADDRESS	* *			
CITY-ST-ZIP			2.4 CI	TY-ST-ZIP				
TITLE		DELETE	3.1 TIT	LE		Change Addition		
NAME	<b>₩</b> *		3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET ADDRESS				
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP				
TITLE		DELETE	4.1 TIT			☐ Change ☐ Addition		
NAME			4. 2 N/	AME.				
STREET ADDRESS				REET ADDRESS				
!				Y-ST-ZIP				
CITY+ST-ZIP TITLE		DELETE	5.1 TIT		, , , , , , , , , , , , , , , , , ,	Change Addition		
NAME	•		5.2 NA	1		• —		
				REET ADDRESS				
STREET ADDRESS				- 1				
CITY-ST-ZIP		DELETE	5.4 CII	Y-ST-ZIP		Change Addition		
TITLE		- vittelt				Figure Figures		
NAME			6.2 NA					
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP			6.4 CI	Y-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 changed, or on an attachment with an address.