

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02710 (6)

1. Corporation Name
BRONCO ELECTRIC, INC.



Principal Place of Business
1062 PINEBRANCH DRIVE
FT. LAUDERDALE FL 33326
US

Mailing Address
1062 PINE BRANCH D.
16345 W. DIXIE HIGHWAY #179
FT. LAUDERDALE FL 33326
US

3. Date Incorporated or Qualified 07/18/1989 3a. Date of Last Report 04/25/1995

2. Principal Place of Business 21 4855 BRIGHTON LAKES BLVD 2a. Mailing Address 26 4855 BRIGHTON LAKES BLVD
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 City & State 23 BOYNTON BEACH, FL 27 City & State 28 BOYNTON BEACH, FL
Zip 24 33436-4846 Country 25 USA 29 33436-4846 Country 30 USA

4. FEI Number 65-0145727 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRAVITZ, DAVID
1062 PINE BRANCH DRIVE
FT. LAUDERDALE FL 33326

81 Name KRAVITZ, DAVID
82 Street Address (P.O. Box Number is Not Acceptable) 4855 BRIGHTON LAKES BLVD
83
84 City BOYNTON BEACH FL 85 Zip Code 33436-4846

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 David C. Kravitz PRESIDENT

Signature, typed or printed name of registered agent and type, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE PD
NAME KRAVITZ, DAVID
STREET ADDRESS 1062 PINE BRANCH DR.
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE ST
NAME KRAVITZ, GABRIELA
STREET ADDRESS 1062 PINE BRANCH DR.
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
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CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PD
1.2 NAME KRAVITZ, DAVID
1.3 STREET ADDRESS 4855 BRIGHTON LAKES BLVD
1.4 CITY-ST-ZIP BOYNTON BEACH, FL 33436-4846
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: David C. Kravitz DAVID C. KRAVITZ 4-12-96 407-786-5398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)