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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L50432

(8)

SPECIALTY ELECTRIC, INC.

Mailing Address

10432 S.W. 21ST STREET

Principal Place of Business

10432 S.W. 21ST STREET

**FILED** Feb 28 1997 8:00am Secretary of State



MIAMI FL 33165		MIAMI FL 33185-7314								
						3. Date Incorporated or Qualified 02/12/1990	3a. Da	te of L		port
2. Principal	l Piace of Business	2a. Mailing Address				4. FEI Number			Apr	olied For
21		26				65-0178990			Not Applicable	
Suite, Δr	pt #, etc	Suite, Apt. #, etc			5. Certificate of Status Desired	X		<b>75</b> A	dditional	
22 City 8 St	tate	City & State				C Flastica Composite Financias				
23	28					Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Co	untry		8. This corporation has liability for in	ntengible			
24	25	29	30				Yes [		, 4.	,,,,,,,,,,
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re-	lstered /	Agent		
MIRANDA, BERNABE					Name					
	1432 S.W. 21ST STREET			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
	IAMI FL FL 33165									
				63	}					
				84	City		FL	85	Zip C	ode
44 D	of tall and signer of Continue COV DEC	12 and 607 11.00 Florida State	doe the	للل	o nomed non	poration submits this statement for the p tion's board of directors. I hereby accep		chance	ina ita	rogistorod
agent I SIGNATURI	I am Iamiliar with, and accept the oblig	ations of, Section 607,0505, F	dorida St	eu by atutes	ine corpora 3.		п пе арр	OHILITIE	11.4251	egisiereo
	Sign thing typical or printed name of registered again				int signature requi	red when reinstating)	DATE	DIDEC	~~~~	
12.	OFFICERS AN	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	Ch	***************************************	Addition
TillE	V ANDANIOA ALIIO I	ריין מנוננונ		TITLE				EJ UIK	лцс	L. Number
NAME	MIRANDA, LUIS L.			NAME						
STREET ADOMES					ADDRESS					
GUY-ST ZIF TITLE	MIMAI FL PSD	☐ DELETE		CITY-S TITLE	1 - 71P			Cha	anne	Addition
NAME	MIRANDA, BERNABE		1	NAME				VIII.	mgo	L ridoliton
STREET ADDRES	The same and the same assessment				ADDRESS					
	MIAMI FL									
CIY-ST-ZIP TITLE	T T	DELFTE		ITLE	ST-ZIP	, , , , , , , , , , , , , , , , , , ,		Cha	anne	Addition
NAME	MIRANDA, BERNABE		1	NAME						
STREET ADDRESS					ADORESS					
C(1Y - S1 - 7)P	MIAMI FL		•		ST-ZIP					
TILLE	PDT	DELE TE		ITLE				[] Cha	ange	Addition
NAM!	MIRANDA, BERNABE		4.2	NAME					-	
STREET ADDRES	44444 A 111 A 489 ATTET				ADDRESS					
CITY - \$1 - 7(2)	MIAMI FL		4.4	City-S	T- ZIP					
TIT. F		DELETE	51	TITLE				Cna	ange	Addition
NAME			52	NAME						
STREET AUDRES	88		53	STREET	ADORESS					
City - ST - Zor			54	CITY - S	IT-ZIP					
1:TU		DELETE	6.1	TITLE				Cha	ange	Addition
NAME			6.2	NAME	1					
STREET ADDRES	ss		6.3	STREET	ADDRESS					
City-St-ZiP			6.4	CITY-S	i - 7 P					
						The second secon		- 112		

14. If 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 agricults frue and accurate and that my signature shall have the same legal effect as if made under oath; that I arrive of director of the Corporation or the receive infrusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or an artisty then this naiddress.

SIGNATURE:

BERNADE MINANDA M. 2/24/97