Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90195 036 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris .

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L59549

1. Corporation Name

FUHUHA	M ELECTHIC, INC.									
Principal Place	e of Business	Maifing Address						BIBII BIBII BIBI	II AI Arr arbit saut	
4800 SHIPLEY A	AVE	4800 SHIPLEY AVE								
SARAŞOTA FL 34235		SARASOTA FL 34235					DO NOT WRITE IN THIS SPACE			
บร	U\$					3. Date Incorporated or Qualifed				
							03/15/1990			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number		Applied For	-
21		26					65-0178144		Not Applicable	┨
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Regulred	-	
22		27							1	
City & State	e	City & State	ļ				6. Election Campaign Financing		May Be	
23		28					Trust Fund Contribution			1
—∖ Zip	Country	Zip		ни у			This corporation owes the current year I Personal Property Tax.	ntangible ☐ Yes	□No	
24	25		30				10. Name and Address of New Registerer			1
	9. Name and Address of Currer	it Registered Agent		81	Name		To. Italia dia riadica di trovi la giorni			1
FORDHAM, R. HOMER 4800 SHIPLEY AVE.			-	82	Street A	ddres	ss (P.O. Box Number is Not Acceptable)	<u> </u>		
	ASOTA FL 34235		-	83						1
O/ 11 U	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								<u> </u>	1
				84	City		F <sup>-</sup>	<b>L</b>   85   Zig	p Code	
agent. I ar SIGNATURE	m familiar with, and accept the obligation of th	nt and title if applicable. (NOTE:	Registered	tes.	•		's board of directors. I hereby accept the app			
12.			_	13. 1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS	Change		ł
TITLE	D CORDUMN D HOMED	<del></del>							0	
NAME	FORDHAM, R. HOMER			1.2 NAME						
STREET ADDRESS	4800 SHIPLEY AVE.			1.3 STREET ADDRESS						
CITY-ST-ZIP			_	1.4 C/TY-ST-Z/P 2.1 TITLE				Change	e [] Addition	1
TITLE	_			2.2 NAME				··-··g		ŀ
NAME			and the second	2.3 STREET ADDRESS						
STREET ADDRESS				2.4 CITY-ST-ZIP						
CITY-ST-ZIP			2.4 CH					Change	e Addition	-
TITLE	. ~		3.2 NAMI						_	l
NAME			4		T ADDRESS					1
STREET ADDRESS			1							ł
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- 4.1 TITLE		11-24		<del></del>	☐ Chang	e	1
NAME		<u>_</u>	4. 2 NAME		-			·		1
l					T ADDRESS					
STREET ADDRESS										1
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-1			<del></del>		☐ Chang	e Addition	1
NAME			5.2 NA							1
STREET ADDRESS			5.3 ST	REET	T ADDRESS					
CITY-ST-ZIP			5.4 CIT	Y-\$1	T-ZIP					
TITLE	DELETE 6.1			ιE				☐ Chang	e Addition	1
NAME	621		6.2 NA	ME						

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

R. Homer Fordham

6.3 STREET ADDRESS

2/11/99

(941)358-0422

Daytime Phone #