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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # L8253 ELECTRIC, INC.	6 (8)				1 Jiji 1100 Atlik Bibli Bibli	1 <u>8</u> 1811 81811 1881
Principal Place of Business C/O J. LEE COLE 3520 INVESTMENT LANE. #6		Mailing Address C/O J. LEE COLE 3520 INVESTMENT LANE. #6			0 0/01 01017 0/01/ 0/0/1 0/0/1 0/0/1		
RIVIERA BE	ACH FL 33404	RIVIERA BEACH FL			3. Date Incorporated or Qualified	3a. Date of Last R	leport
2. Princinal P	lace of Business				06/21/1990	04/07/19	
21	1000 of 1000 in 1000	2a. Mailing Address			4. FEI Number 65-0216594	L	Applied For
Suite. Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Addition		Not Applicable	
City & Stat	e	City & State					Required
23		28			Election Campaign Financing Trust Fund Contribution		0 мау Ве
Z _I p 24	Country	Zip	Country		8. This corporation has liability for i	Adde	d to Fees
24	9. Name and Address of Curren	29	30		Florida Statutes 🔲 Yes	□ No	150.002
- · ·	- Contraction of Contraction	r riegistered Agent	81	Name	10. Name and Address of New R	egistered Agent	
COLE, .			82	Ctroop Add	ress (P.O. Box Number is Not Acceptable		
3520 IN	IVESTMENT LANE, #6 BEACH FL 33404		Ĺ"ĺ	Street Add	ress (r.O. box Number is Not Acceptable	le;	
NIVICIA	DEAUT FL 33404		83				·
			84	City	~		Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above na	anied corpo	ration submits this statement for the num	FL 09 21	agistared office
familiar wi	th, and accept the obligations of Section	a. 3001 change was authori on 607.0505, Florida Statute:	zed by the corpo 3.	ration's boa	ration submits this statement for the purp rd of directors. Thereby accept the appo	intment as registered	agent. I am
SIGNATURE	Signature, typed or printed name of registered agent a	and trie if applicable (No	DTE: Registereo Agent			DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		RS IN 12
THE	COLE, J. LEE	☐ DELETE	,			☐ Change	Addition
STHEET ADDRESS	4718 LILLIAN RD.		1.2 NAME	Doniee			
C11Y - S1 - Z1P	PALM BEACH GARDENS FL		1.3 STREET ADDRESS 1.4 City - St - Zip				
TITLE	P COLE DINAME	☐ DELETE	2 1 MHE			☐ Change	Addition
NAME STREET ADDRESS	COLE, PHILLIP 8287 KELSO DR.		2.2 NAME				_
CITY - ST - ZIP	PALM BCH. GARDENS FL		2.3 STREET ADDRESS				
TITLE	VP DELETE		2 4 CHY-ST-ZIP 3 1 TITLE			☐ Change	Addition
NAME	PHILLIP T. COLE	•	3.2 NAME			மாவழ்	AUGROII
STREET ADDRESS CITY-ST-ZIP	15781 79TH TERRACE NORTH PALM BEACH GARDENS FL	1	3 3. STREET A				
TITLE	\$	☐ DELETE	3 4 CITY-ST- 4 1 1:TLE	ZIP		——————————————————————————————————————	
NAME	MARK L. COLE	hand Sacra	4.2 NAME			Change	Addition:
STREET ADDRESS	2542 MANIKI DRIVE		4.3 STREET AL	DDRESS			Ì
CITY-S1-ZIP	WEST PALM BEACH FL	F3 on the	4 4 CH Y - ST -	ZI;			
NAME		☐ DELETE	5 1 TITLE			☐ Change	Add tion
STREET ADDRESS			5.2 NAME 5.3 STREET AL	ODRESS			
CITY-ST-ZIP			5.4 CITY-ST-				
TITLE		☐ DELETE	6 1 TITLE			☐ Change	Addition
NAME STREET ADDRESS			62 NAME				ļ
Dily-SI-ZiP			6.3 STREET AT	710			ļ
14. I do hereby	certify that the information supplied with the information indicated on this annual	th this filing is voluntarily furni	64 City - S1 shed and does r	at a mit de	r the exemption stated in Section 119.07	7(3)(k) Florida Statuto	n 16 idho-

carry 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

TLEE-COLE

NTED NAME OF SIGNING OFFICER OR DIRECTOR

H-10-96 H07-941-8441

Depths Proces