## 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 # L82536

COLE ELECTRIC, INC.

## **FILED** Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90048 038 \*\*\*150.00

| OOLE. EI   | ELOTTIO, INC.  |  |  |  |  |   |  |                  |
|--|--|--|--|--|--|---|--|------------------|
| Principal Plac   | ce of Business   | Mailing Address  |  |  |  | IE ONL BLEN BIBN OLDN EN                              | (1 018)1 01011 1001  |                  |
| C/O J. LEE COLE<br>3520 INVESTMENT LANE. #6<br>RIVIERA BEACH FL 33404  |  | C/O J. LEE COLE<br>3520 INVESTMENT LANE. #6  |  |  | DO NOT WEST  | FE IN THIS SPACE                                      |  |                  |
| HIMERA REAC  | H FL 33404   | RIVIERA BEACH FL 33404   |  |  | 3. Date Incorporated or Qualifed   | TE IN THIS SPACE                                      |  | 7                |
|  |  |  |  |  | 06/21/1990   |   |  | }                |
| 2. Principal P   | Place of Business  | 2a. Mailing Address  |  |  | 4. FEI Number  |   | Applied For  | 1 10             |
| 21   |  | 26   |  |  | 65-0216594   | <del></del>   | Not Applicable   |                  |
| Suite, Apt.  | . #, etc.  | Suite, Apt. #, etc.  |  |  | ,  | <b>\$8.75</b>   | Additional   | 1 :              |
| 22   |  | 27   |  |  | 5. Certifcate of Status Desired  | Fee   | Required   |                  |
| City & Stat  | te   | City & State   |  |  | 6. Election Campaign Financing   |   | May Be   | _                |
| 23   |  | 28   |  |  | Trust Fund Contribution  | Adde Adde   | d to Fees  | 4                |
| Zip  | Country  | Zip  | Country  |  | 8. This corporation owes the curre   | · <u>-</u>  |  |                  |
| 24   | 25   | 29 30  | ]  |  | Personal Property Tax.   | Yes   | □No  | ┨                |
| _  | 9. Name and Address of Currer  | nt Registered Agent  | 81   | Name   | 10. Name and Address of New R  | egistered Agent                                       |  | 1                |
| COL  | E, PHILLIP H   | •  |  | Hame   |  |   |  |                  |
| 3520 INVESTMENT LANE, #6   |  |  | 82   | Street Addre   | ddress (P.O. Box Number is Not Acceptable)   |   |  |                  |
|  | ERA BEACH FL 33404   |  | 83   |  | 1.774 . 11. 11. 11. 11. 11.  | Tanaha sa      | 1391 390 (38)  | 1                |
| 1 TI WILT  |  |  |  |  |  |   |  | -                |
| 111VI  |  |  | 84   | City   | THE STATE OF | " 85 Zi   | Code * ` **  |                  |
|  | to the provisions of Sections 507 050  | 02 and 607 1508 Florida Statutes   |  | •  | pration submits this statement for the   | PL  |  |                  |
| 11. Pursuant   | registered agent, or both, in the State<br>am familiar with, and accept the obliga   | of Florida. Such change was authoritions of, Section 607,0505, Florida   | the above<br>orized by to<br>Statutes.   | e-named corpo<br>the corporation   | oration submits this statement for the pin's board of directors. I hereby accept   | t the appointment as                                  | ts registered  |                  |
| 11. Pursuant<br>office or r<br>agent. I a<br>SIGNATURE   | registered agent, or both, in the State<br>am familiar with, and accept the obligation<br>Signature, typed or printed name of registered age   | of Florida. Such change was authoritions of, Section 607.0505, Floridant and title if applicable. (NOTE: Re  | the above<br>orized by<br>a Statutes.  | e-named corpo<br>the corporation   | in's board of directors. I hereby accept   | t the appointment as                                  | ts registered registered                                     |                  |
| 11. Pursuant office or ragent. I a SIGNATURE   | registered agent, or both, in the State<br>am familiar with, and accept the obliga<br>Signature, typed or printed name of registered age<br>OFFICERS AN  | of Florida. Such change was authoritions of, Section 607,0505, Florida   | the above<br>orized by to<br>Statutes.   | e-named corpo<br>the corporation   | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as                                  | ts registered registered                                     | 44,000           |
| 11. Pursuant<br>office or r<br>agent. I a<br>SIGNATURE   | registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of | of Florida. Such change was authoritions of, Section 607.0505, Florida  nt and title if applicable. (NOTE: Rev. ND DIRECTORS   | the above<br>orized by the<br>Statutes.  | e-named corpo<br>the corporation   | in's board of directors. I hereby accept   | t the appointment as  DATE FICERS AND DIRECT          | ts registered registered                                     | 14 (4/4/00)      |
| 11. Pursuant office or ragent. I a SIGNATURE   | registered agent, or both, in the State am familiar with, and accept the obligation of the state am familiar with, and accept the obligation of the state of the  | of Florida. Such change was authoritions of, Section 607.0505, Florida  nt and title if applicable. (NOTE: Rev. ND DIRECTORS   | the above orized by a Statutes.  gistered Agent 13. 1.1 TITLE 1.2 NAME   | e-named corporation  | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE FICERS AND DIRECT          | ts registered registered                                     | 00.4 (44,600)    |
| 11. Pursuant office or ragent. I a SIGNATURE.  12. TITLE NAME  | registered agent, or both, in the State am familiar with, and accept the obligated agents of registered agents of the state of the state of registered agents of the state of registered agents of the state of the state of registered agents of the state  | of Florida. Such change was authoritions of, Section 607.0505, Florida  nt and title if applicable. (NOTE: Rev. ND DIRECTORS   | the above orized by sa Statutes.  gistered Agent 13. 1.1 TITLE   | e-named corporation to corporation to signature required                                 | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE FICERS AND DIRECT          | ts registered registered                                     | (44,600)         |
| 11. Pursuant office or ragent. I a SIGNATURE  12. TITLE  NAME  STREET ADDRESS  | registered agent, or both, in the State am familiar with, and accept the obligated signature, typed or printed name of registered age OFFICERS AND COLE, J. LEE  | of Florida. Such change was authoritions of, Section 607.0505, Florida  nt and title if applicable. (NOTE: Rev. ND DIRECTORS   | the above orized by a Statutes.  gistered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET  | e-named corporation to corporation to signature required                                 | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE FICERS AND DIRECT          | ts registered registered  FORS IN 12                         | ODOFO04 (44,000) |
| 11. Pursuant office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the oblig | of Florida. Such change was authoritions of, Section 607.0505, Florida nt and title if applicable. (NOTE: Rev. ND DIRECTORS  | the above orized by a Statutes.  gistered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST  | e-named corporation to corporation to signature required                                 | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE  FICERS AND DIREC  ☐ Chang | ts registered registered  FORS IN 12                         | ODOE004 (44,600) |
| 11. Pursuant office or ragent. I a SIGNATURE  12. RILE NAME STREET ADDRESS CITY-ST-ZIP   | registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the oblig | of Florida. Such change was authoritions of, Section 607.0505, Florida nt and title if applicable. (NOTE: Rev. ND DIRECTORS  | the above orized by the astronomy of the above orized by the astronomy of  | e-named corporation the corporation t signature required  ADDRESS                        | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE  FICERS AND DIREC  ☐ Chang | ts registered registered  FORS IN 12                         |                  |
| 11. Pursuant office or ragent. I a SIGNATURE.  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the oblig | of Florida. Such change was authoritions of, Section 607.0505, Florida nt and title if applicable. (NOTE: Rec ND DIRECTORS   | the above orized by 1 a Statutes.  13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME   | e-named corporation the corporation t signature required  ADDRESS -ZIP  ADDRESS          | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE  FICERS AND DIREC  ☐ Chang | ts registered registered  FORS IN 12                         | ODOLDON (43,000) |
| 11. Pursuant office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the  | of Florida. Such change was authoritions of, Section 607.0505, Florida nt and title if applicable. (NOTE: Rev. ND DIRECTORS  | the above orized by 1 a Statutes.  13. 1.1 TITLE 12 NAME 1.3 STREET 2.1 TITLE 2.2 NAME 2.3 STREET  | e-named corporation the corporation t signature required  ADDRESS -ZIP  ADDRESS          | I when reinstating)  ADDITIONS/CHANGES TO OFF  | t the appointment as  DATE  FICERS AND DIREC  ☐ Chang | ts registered registered  FORS IN 12  e                      | ODDEOON (44.00)  |
| 11. Pursuant office or ragent. I a SIGNATURE.  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | registered agent, or both, in the State am familiar with, and accept the obligation of the state am familiar with, and accept the obligation of the state of the  | of Florida. Such change was authoritions of, Section 607.0505, Florida int and title if applicable. (NOTE: Reg ND DIRECTORS DELETE   | the above orized by 1 a Statutes.  13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-ST 2.4 CITY-ST 2.5 AGE 2.4 CITY-ST  | e-named corporation the corporation t signature required  ADDRESS -ZIP  ADDRESS          | I when reinstating)  ADDITIONS/CHANGES TO OFF  | DATE  FICERS AND DIRECT  Chang                        | ts registered registered  FORS IN 12  e                      | (44)(00)         |
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| 11. Pursuant office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the  | of Florida. Such change was authoritions of, Section 607.0505, Florida int and title if applicable. (NOTE: Reg ND DIRECTORS   DELETE   DELETE   DELETE   | the above orized by 1 a Statutes.  13. 1.1 TITLE 12 NAME 13 STREET 14 CITY-ST 22 NAME 23 STREET 2, 4 CITY-SI 3.1 TITLE 32 NAME   | ADDRESS 1-ZIP ADDRESS ADDRESS ADDRESS  | I when reinstating)  ADDITIONS/CHANGES TO OFF  | DATE  FICERS AND DIRECT  Chang                        | ts registered registered  FORS IN 12  Per Addition  Addition | ODDEDON (44/00)  |
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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.

**SIGNATURE**