## 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 # M06339

(9)

YES ELECTRICAL CORPORATION

Principal Plac	Mailing Address	Address			T CONTACT OF CONTACT O				
6290 W 16TH / HIALEAH FL 33		6280 W 18TH AVE HIALEAH FL 33012-6218							
						3. Date incorporated or Qualified 10/11/1984		ate of Last 01/1996	
2. Principal P	lace of Business	24. Mailing Address			<del></del>	4. FEI Number	—l		Applied For
		26				59-2457073		1	Not Applicat
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & Stat	6	City & State				Election Campaign Financing     Trust Fund Contribution			O May Be d to Fees
Zip []	Country 25	Z <sub>i</sub> p	30	ıntry	'	This corporation has liability for Florida Statutes		tax under	s. 199.032,
1	9. Name and Address of Curr			Ī		10. Name and Address of New Re	gistered	Agent	
MARTINEZ, FAUSTINO					Name				***************************************
	W 16TH AVE			B2	Street Add	Iress (P.O. Box Number is Not Acceptal	hla)		
	EAH FL 33012			02	Street Add	iliass (P.O. Box Indilibel is not Accepta	Jie j		
				83	· · · · · · · · · · · · · · · · · · ·	771			
					0.4			1221 75	- 0-4-
				84	City		FL	85 Zip	p Code
office or a	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the obl	ite of Florida. Such change was	authorize	d by	the corpora	poration submits this statement for the inion's board of directors. I hereby acce	ourpose o pt the app	f changing pointment a	) its registere as registered
SIGNATION	Signature, typicd or printed name of registered a			d Age	ent signature requ	ered when reinstating)	DATE		
2.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND		
ILE	LANDTHET CALIOTIALS	DELETE	1.170	TLE				Change	e 🔲 Additi
AME:	MARTINEZ, FAUSTINO		1.2 N	AME	1	•			1
TREET ADDRESS	6290 W 16 AVE		1.3 \$	TAEET	r address				
1TY-ST-7-P	HIALEAH FL	·	_		ST-ZIP	·		·	<del></del>
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AME	MARTINEZ, MARIA		2.2 N	AME					
TREE! ACORESS	6290 W. 16TH AVE.		2.3 S	TAEET	ADDRESS				
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MANA			32 N	AME	-				
STREET ADDRESS			335	TAEET	r address	·			
CHTY-ST-Z-P					ST-ZIP		·····		
TifLE		DELETE	4.1 (	ITLE				Change	e 🔲 Additi

6.4 CITY-ST-ZIP

14. I 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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are 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 application in the composition of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

4.2 NAME

5 1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 T/TLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.3 STREET AODRESS 4.4 CHTY-ST-ZIP

SIGNATURE

NAME

THUE

Title

NAME

STREET ADDRESS

SCHELL ADDRESS

STREET ADDRESS

CHTY- \$1-7-2

NATURE AND THE OF PHINTED NAME OF YORING OFFICER OF DIRECTOR SELFTELS.

DELETE

DELETE

4/19/97 (305) 4/19/97 557-4550 Daysing Phone

**FILED** 

May 07 1997 8:00am

Secretary of State

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Change

Change

Addition

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