

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

**APPROVED  
AND  
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**95 MAY -1 AM 9:12**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



**FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS**

**DOCUMENT # M15607 (8)**  
1. Corporation Name  
**BORGES ELECTRICAL CONTRACTORS INC**

Principal Place of Business Mailing Address  
**301 SW 63rd court 301 SW 63rd. court  
MIAMI FLA. 33144 MIAMI FLA. 33144**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address  
21 **301 SW 63rd court** 26 **301 SW 63rd court**  
22 Suits, Apt. #, etc. 27 Suits, Apt. #, etc.  
23 City & State **MIAMI FLA** 28 City & State **MIAMI FLA**  
24 **33144** 25 Country **US** 29 **33144** 30 Country **US**

3. Date Incorporated or Qualified **05/16/1985** 3a. Date of Last Report **4/13/94**  
4. FEI Number **59-2471772** Applied For   
Not Applicable   
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**ROLANDO BORGES JR.  
11629 SW 69 ST.  
MIAMI FLA. 33193**

10. Name and Address of New Registered Agent  
B1 Name **ROLANDO BORGES**  
B2 Street Address (P.O. Box Number is Not Acceptable) **301 SW 63rd COURT**  
B3  
B4 City **MIAMI** B5 FL B6 Zip Code **33144**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Rolando Borges DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and 1484 applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>P/O. BORGES ROLANDO</b>	1.2 NAME	
STREET ADDRESS	<b>301 SW 63rd COURT</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIAMI FL 33144</b>	1.4 CITY - ST - ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	<b>800001485038</b>
CITY - ST - ZIP		2.4 CITY - ST - ZIP	<b>-05/12/95--01012--023</b>
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	<b>***200.00 ***200.00</b>
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 the 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.

SIGNATURE: Rolando Borges DATE **4/27/95** **301 266-8931**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Name Printed)