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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Dorinda B. Mortimer
Secretary of State
UNIVERSITY LA. COMPLEX, TALLAHASSEE

DOCUMENT # M32227

(4)

1. Corporation Name

GUCER ELECTRIC CORPORATION

DO NOT WRITE IN THIS SPACE

Previous Name of Corporation: **% GUSTAVO A. CERVANTES**
670 W. 74 PL
HALEAH FL 33014

Mailing Address: **% GUSTAVO A. CERVANTES**
670 W. 74 PL
HALEAH FL 33014

3. Date Incorporated or Qualified: **05/16/1986**
3a. Date of Last Report: **07/25/1994**

2. Principal Office (Street, Suite, Apt. #, etc.)
21 State Apt. # etc.

22 City & State

23 City & State

24 Country

2a. Mailing Address:
26 State Apt. # etc.

27 City & State

28 City & State

29 Country

4. FCI Number: **59-2709155**
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**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CERVANTES, GUSTAVO A.
670 W 74TH PL
HALEAH FL 33014

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.012 and 607.0505, 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 provisions of Sections 607.012 and 607.0505, Florida Statutes.

SIGNATURE

[Signature]

GUSTAVO CERVANTES

4/26/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY, ST, ZIP
DP	CERVANTES, GUSTAVO A.	670 W. 74 PL	HALEAH FL
STD	CERVANTES, NANCY B.	670 W. 74 PL	HALEAH FL

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY, ST, ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 130.07(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 this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing as an officer or director with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 **5576-3085**
Date Signature Page 8