## 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

**DOCUMENT** # 1. Corporation Name

M68137

(2)

CITY LIGHTING SERVICE, INC.

Principal Place of Business Mailing Address								
% RICHARD P. MILLER 2841 N.E. 46TH ST. LIGHTHOUSE POINT FL 33064		2841 N.E. 46TH S	% RICHARD P. MILLER 2841 N.E. 46TH ST. LIGHTHOUSE POINT FL 33064		3. Date Incorporated or Qualified	3a Date	of Last Re	eourt
						03/01/19		
21 26		2a, Mailing Address					Applied For	
								Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	7		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees		
Zip	Country	Zip	Country		8. This corporation has liability for		x under s	199.032,
24	25	29	30		Florida Statutes	□ No	Agent	
	g. Name and Address of Curr	ent Registered Agent	61	Name	10. Name and Address of New F	egistered	- Heir	
MHIF	R, RICHARD P.		82		ress (P.O. Box Number is Not Acceptat	olo)		
2841 l	N.E. 46TH ST.		83					
LIGHT	HOUSE POINT FL 33064						127	Code
			84	City		FI	85 Zi	o Code
SIGNATURE .	Signature, typico or printed name of registered ag OFFICERS A	rest and ittle it apparable	(NOTE: Registered Agri	ते अध्यक्षकेत्व एक्ष्मण	ADDITIONS/CHANGES TO OFF	DATE	DIRECTO	PRS IN 12
TITLE	D	☐ DELFTF	1 17111	· ···· I · · ·			Change	Add tion
NAME	MILLER, RICHARD P.		1.2 NAME					
STREET ADDRESS	2841 N.E. 46TH ST.		1.3 STREET	LADORESS				
CITY - SI - ZIP	LIGHTHOUSE PT. FL	FT DELET	1.4 CITY - S	51 · ZIP		····	Change	Addition
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NAME DESCRIPTION OF THE PROPERTY OF THE PROPER				: ADDRESS				
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TITLE		☐ DELFTE	3 1101.6			[	Change	Add-tion
NAME:			3.2 NAME					
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1)T:F		DELETE	6 1 11 <sup>1</sup> 1.E					L) Addition
NAME			62 NAME	TIADDRESS				
STREET ADDRESS			6.4 CITY -					
CITY - ST - 7IF	t the the letter and an amplif	and with this flips is voluntarily	the picked and do	es not <b>o</b> ualify	for the execution stated in Section 119	0.07(3)(k), Eu	orida Statu	ites I further

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. 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.

SIGNATURE: ALLA GALA STATES OF BUILTEN NAME OF SITINING OFFICER OPPOSITIONS

3/26/96 (954) 187-2569