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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90108 047 ***150.00

DOCUMENT # M73465

R & R ELECTRIC OF JUPITER, INC.

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Principal Place	e of Business	Mailing	g Address				- I SANIGATII 119 INDAS IIII BYNIN NIINS NIS	1 91811 21211 918		911 91911 1981
135 EVERNIA S	TREET	135 EV	ERNIA STREET							
JUPITER FL 33458		JUPITE	JUPITER FL 33458				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
•							03/23/1988			
2 Princinal Pi	lace of Business	2a. Ma	ailing Address				4. FEI Number		App	lied For
21			26				65-0080711	Ī	Not	Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.				_	\$8	.75 _{.A}	ditional
22		27	27				55. Certificate of Status Desired		ee Red	uired
City & State	e		ty & State				6. Election Campaign Financing	\$	5.00 h	May Be
23		28					Trust Fund Contribution		dded to	Fees
Zip	Country ,	Zip	,	Cou	untry		8. This corporation owes the current y			
24	25	29		30			Personal Property Tax.	Y ₁		_]No
	9. Name and Address of Curr	ent Registere	ed Agent				10. Name and Address of New Regis	tered Agent		
5484	TED DODEDT				81	Name				
	ITER, ROBERT				82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
	FAITH WAY									
JUPI	TER FL 33458			,	83					
					84	City		- 85	Zip C	ode
						,		FL J	 	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1	1508, Florida Statut	tes, the a	above-r	named corpo	ration submits this statement for the purp n's board of directors. I hereby accept the	ose of chang appointmen	ing its i t as req	egisterea istered
agent. I a	m familiar with, and accept the obli	gations of, Se	ction 607.0505, Flo	orida Stat	tutes.	,		• •	_	
SIGNATURE			~ _ _							
	Signature, typed or printed name of registered a					ignature required	when reinstating) ADDITIONS/CHANGES TO OFFICE	ATE	ECTO	2S IN 12
12.		AND DIRECTO	DELETE	13.			ADDITIONS/CHANGES TO OFFICE		hange	Addition
TITLE	PTD DOPERT			1.3 N						
NAME	PAINTER, ROBERT			■ 1.2 IV						
STREET ADDRESS	114 FAITH WAY			40.5		OBOCCO				
CITY-ST-ZIP	JUPITER FL				TREET A					
TITLE	SD		——————————————————————————————————————	1.4 C	TREET AL			По	hange	Addition
NAME	DAINTED ICANI		☐ DELETE	1.4 C 2.1 T	TREET AI HTY-ST-2				hange	Addition
AFDEET 1 DODESO	PAINTER, JEAN		☐ DELETE	1.4 C 2.1 T 2.2 N	TREET AL TITY-ST-Z TITLE IAME	ZIP			hange	Addition
STREET ADORESS	114 FAITH WAY		☐ DELETE	1.4 C 2.1 T 2.2 N 2.3 S	TREET AL SITY-ST-2 TILE IAME STREET AL	ZIP DORĘSS			hange	☐ Addition
CITY-ST-ZIP				1.4 C 2.1 T 2.2 N 2.3 S 2.4 C	TREET AL STY-ST-2 TILE LAME STREET AL CITY-ST-	ZIP DORĘSS	~ .	·	hange	Addition
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* 1757 . CITY-ST-ZIP 14. I hereby certify that the information supplied with this flying 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 of 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.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.6.99 S61 746-170)