FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # M82813

(0)

A PLUS ELECTRICAL CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

6334-1 PHILLIPS HIGHWAY JACKSONVILLE FL 32216 6334-1 PHILLIPS HIGHWAY JACKSONVILLE FL 32216-8050

FILED May 13 1997 8:00am Secretary of State



							3. Date Incorporated or Qualified 05/24/1988	3a. Date 03/2	of Last F 6/1996	
	Principal Pla	ce of Business		2a. Mailing Address			4. FEI Number			oplied For
21	Suite, Apt. #, etc.			Suite, Apt. #, etc.			59-2896940 Not Applicab			
22	ouite, Apt. #,	, etc.	27	n. W, ENG.			5. Certificate of Status Desired			Additional equired
	City & State		City & St.	ale	•		6. Election Campaign Financing			May Be
23			28				Trust Fund Contribution			to Fees
	Zip	Country	Z)p	-	Countr	У	8. This corporation has liability for i			. 199.032
24		25 Name and Address of Curre	29		30]		Florida Statutes 10. Name and Address of New Re	Yes		
	DDA		ni negistereu Age		81	Name	TO. Name and Address of New Ne	gistereu Ag	JIIL	
						Ivanic				
					82 Street Add		ddress (P.O. Box Number is Not Acceptab	ile)		
9. Name and Address of Current BROOKS, MICHAEL 437 EAST MONROE ST. SUITE 202 JACKSONVILLE FL 32202 11. Pursuant to the provisions of Sections 607 0507 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligated SIGNATURE Signature, typed or printed name of registered agent. I the DP FLYNN, JOHN STREET ADDRESS CITY-ST-ZIP 9. Name and Address of Current BROOKS, MICHAEL 437 EAST MONROE ST. SUITE DP FLYNN, JOHN 6334-1 PHILLIPS HWY JACKSONVILLE FL				83	5	The state of the s				
					84	City	-/	FL	35 Zip	Code
44	5	45 1-1/ D	00 1007 1500 5			L				
''	office or reg agent. I am	the provisions or Sections 607.050 gistered agent, or both, in the State I familiar with, and accept the oblig	oz and 607, 1606, F e of Florida. Such e jations of, Section (change was au 607.0505, Flori	s, the abov ithorized b ida Statute	re-named c by the corpo s.	erporation submits this statement for the poralion's board of directors. Thereby accep	ot the appoin	anging i tment as	registered
SIG	SNATURE 5	ngnature, typed or printed name of registered ag	ent and blue if applicable	(NO1E	Registered Ap	ent signature re	equired when reinstating)	DATE		
12			ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOF	RS IN 12
TITL	£	••		DELETE	1.1 TIECE				Change	Addition
NAM	AE	FLYNN, JOHN			1.2 NAME					
STR	EET ADORESS				1.3 STREE	T ADDRESS				
CIT	r-ST-ZIP	JACKSONVILLE FL			1.4 CITY-	S1 - ZiP				
TITL	Ε			DELFTE	2.1 1/11.6				Change	Addition
114.1	IE.				2.2 NAME					
-51R	ET ADDRESS				2.3 STREE	1 ADDRESS				
CIT	1-ST-ZIP			÷	2. 4 CITY-	S1-ZIP				
TITL			Ţ.	DELETE	3.1 TITLE				Change	Addition
NAM	AE				3.2 NAME					
STA	EET ADDRESS				3.3 STREE	1 ADDRESS				
CIT	/-ST-ZIP				3.4. D(TY-	-ST-ZIP				
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NAN	Æ.				4. 2 NAME	:				
STR	EET ADDRESS				4.3 STREE	I ADDRESS				
CIT	(-ST-ZIP				4.4 CITY -	S1-ZIP				
TITL				DELETE	5 1 TITLE				Change	Addition
NAM	AE .				5.2 NAME					
	EET ADDRESS				5.3 STREE	1 ADDRESS				
	(-ST-ZIP				5.4 CITY-	i				
TITL		······································		DELETE	G.1 TITLE				Change	Addition
NAN			_		6.2 NAME			_	U-	
	EET ADDRESS	() (1 ADDRESS				
	1-ST-ZIP				64 CHY-	i				
		certify that the information expedie	ad with this filing do	no ret qualify			stad in Section 110 07(2)(i) Florida Statute	a I further or	estifica blanch	the s

I do hereby certify that the morrhalm supplied with this hing does not qualify for the exemption stated in section 119.07(5)(f), honda Statutes. I further early that the information indicated on this annual report is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

CICNATUDE.

(24) HILL BY (340) 11 10 4/2519