FILE NOW: FILING FEE AFTER MAY 1 IS $2 5.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMEN STATE
Sandra B. Mort
Secretary of St
DIVISION OF CORPO IONS

DOCUMENT # P92000009353 (3)

1. Corporation Name

PENNMOORE ELECTRIC, INC.

Principal Place of Business	Mailing Address
4700 SW 51ST ST. 200 DAVIE FL 33314 US	4691 NO UNIVERSITY DR STE 394 CORAL SPRINGS FL 33067 US

2. Principal Place of Business
21
State, Apt #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 4700 S.W. 51st treet
Suite, Apt #, etc.
27 Building 200
City & State
28 Davie, Fl
Zip
29 33314 30 Country US

3. Date Incorporated or Qualified: 12/03/1992
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0377677 ☐ 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

COPENSKY, JAMES
4691 NO UNIVERSITY DR
STE 394
CORAL SPRINGS FL 33067

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 4700 S.W. 51st Street Bldg 200
83
84 City Davie FL 85 Zip Code 33314

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 s. 607.0505, Florida Statutes.

SIGNATURE [signature]   DATE 3/26/96

12. OFFICERS AND DIRECTORS		
TITLE	D	☐ DELETE
NAME	COPENSKY, JAMES	
STREET ADDRESS	4866 NW 104 LN	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
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CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
(TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition, six blank entries)

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished ... Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: [signature]   3/26/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   DATE   Daytime Phone #