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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P92000014159 (7)

ALL ELECTRIC SERVICES, INC.

Principal Place of Business

Mailing Address

## FILED Apr 23 1997 8:00am Secretary of State



12529 ULMERTON ROAD LARGO FL 34844				12529 ULMERTON ROAD LARGO FL 33774-3600										
								3. Date Incorporated or Qualified 12/21/1992	od 3a. Date of Last Report 04/11/1996			7		
2. Principal Place of Business			2a. Mailing Add	2a. Mailing Address				4. FEI Number			Applied For			
Suite, Apt. #, etc.			26 Suite Act #	Suite, Apt #, etc.									t Applicable	4
22			27					5. Certificate of Status Desired		\$8.75 Additional Fee Required				
City & State			City & State	28					Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip 24		Country 25	Zip 29					8. This corporation has liability for intangible tax under s. 199.03 Florida Statutes ✓ Yes ☐ No						
	9, Name	and Address of Curr	ent Registered Agent					1	10. Name and Address of New Registered Agent					
	lmowski,					81	Name							
12529 ULMERTON ROAD LARGO FL 34844				82			Street /	Address	(P.O. Box Number is Not Acceptat	ole)				
						В3								
i.						84	City	• • • • • • • • • • • • • • • • • • • •		FL	85	Zip (	Code	1
11. Pursuant	to the provis	ions of Sections 607.0	502 and 607.1508, Flori	da Statut	cs, the at	POVE	-named	corpora	ion submits this statement for the p	ourpose of	LL. chang	ing it	registered	-
agent. I a	registered ag ım familiar wi	th, and accept the obl	igations of, Section 607	ige was a .0505, Flo	rida Stati	ı by utos	tne corp :	ooralion	s board of directors. I hereby acce	ot the appo	ointme-	nt as	registerea	ı
SIGNATURE					- 1							•		
12.	Signature, typud	or printed name of registered.  Of FICERS A	ND DIRECTORS				nt signature	required w	ien reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIREC	CTOR	S IN 12	- 6
TITLE	D DELETE				1.1 TITLE			7.2211010707077		Cha		Addition	90/0	
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NAME				1		2.2 NAME								
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NAME					5.2 NA	ME								
STREET ADDRESS							ADDRESS							
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CITY-ST-ZIP					64 CI	Y - S1	I · ZIP	l						_

I do hereby certify that the information supplied with this filing 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 logal effect as if made under eath; that I am an officer or director of the comporation or the description of the d

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4/10/07 (512) 595-9-