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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P93000013087

DEETEE ELECTRIC, INC.

5302 VAN	BUREN I	ROAD
DELRAY I	BEACH FL	33484
	٠,	

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90081 026 ***150.00



Principal Place of Business Mailing Address				- C (ONTINGE) ((B. 1810) (1)15 NAIFT ROTH GENT ONTO	(1)1 000 11111 40 101 1	1011110011001	
5302 VAN BUREN ROAD DELRAY BEACH FL 33484 5302 VAN BUREN ROAD DELRAY BEACH FL 33484							
•		•			DO NOT WRITE IN THI	S SPACE	
	*				3. Date Incorporated or Qualifed		ļ
					02/22/1993		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			65-0406826		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Re	
City & Stat	9	City & State	- t-		6 Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	- 1
Zíp			Country		8. This corporation owes the current year li		
24 25 29 30		o]		Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	d Agent	
			81 Na	me	•		Ì
TIRPAK, DOUGLAS M 5302 VAN BUAREN ROAD			82 Str	eet Addre	ess (P.O. Box Number is Not Acceptable)		
, DELI	RAY BEACH FL 33484	e s s s s s s s s	83		1 2 2 2 2		
	A STATE OF THE STA	A Secretary				as Zin (2010
2 4 4 6 6			84 City	4	, e e e e e e e e e e e e e e e e e e e	85 Zip C	ode
office or r	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was auth tions of, Section 607.0505, Florida	iorized by the c	orporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as reg	gistered ()
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	TIRPAK, DOUGLAS M	-	1.2 NAME				;
STREET ADDRESS	5302 VAN BUREN ROAD		1.3 STREET ADDR	ESS			
CITY-ST-ZIP	DELRAY BEACH FL 33484		1.4 CITY-ST-ZIP	1		•	{
TILE	<u> </u>	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition (
NAME			2.2 NAME				ļ
STREET ADDRESS			2.3 STREET ADDR	ESS			
CITY+ST-ZIP			2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME		-	3.2 NAME	}	للمصابية المرابع والمرابعين المرابع والمرابع والمرابع والمرابع		
STREET ADDRESS			3.3 STREET ADOR	ESS			\ -
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TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME	P		4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDR	ESS			}
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDR	ESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAMÉ				
STREET ADDRESS	·		6.3 STREET ADDR	ESS			[
			64 CITY-ST-7IP				i

14. I 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 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 it charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: