FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P93000023217 (1) **DOCUMENT #**

K.C. ELECTRICAL SERVICES, INC.										
Principal Place	of Business	Mailing Address						UH I (110)	1 11 0 11 1001 1001	
11701 S.W. 1		11701 S.W. 130TH AVE. Miami Fl 33196 US								
US					3. Date Incorporated or Qualified 03/25/1993	3a. Date of Last Report 05/22/1995				
2. Principal Pla	ce of Business	2a. Malling Address			4. FEI Number Applied For					
21		State Ant + etc			65-0411004 Not Applicable \$8.75 Additional					
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Required		
City & State		City & State			6. Election Campaign Financing	<u></u>	\$5.00	May Be		
23		28				Trust Fund Contribution			to Fees	
Zip	Country Z _I p 3			intry		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No				
24	o Name and Address of Currer	29 dress of Current Registered Agent		Τ		10. Name and Address of New Registere				
	8. Hante and Addition	ga		81	Name					
CROOK	VENT			82	Street Add	ress (P.O. Box Number is Not Acceptab	ile)			
	S.W. 130TH AVE.						S (10). DOX 140 Host to 1101 years			
	L 33186			83						
				84	City		FL	85 Zıç	o Code	
	- the analysis of Continue 607 0500	2 and 607 1509 Florida Statu	tos the ahr	We-r	amed coroo	ration submits this statement for the pur	mana of chang	ing its r	egistered office	
or register	ed agent, or both, in the State of Flori th, and accept the obligations of, Sect	ida. Such change was authorit	zeci dv tne	corp	oration's boa	ration scornics this statement for the por ard of directors. I hereby accept the app	bintment as re	gistered	agent. I am	
	in, and accept the obligations of, Sect	TOTO OUT ,COCO, FIORIDA STATOTE	3.							
SIGNATURE .	Signature, typed or printed name of registered agen	t and trite if applicable. (N		d Agen	t signature require	ed when reinstating]	DATE	PECTO	200 11/ 40	
12.	OFFICERS AN	ID DIRECTORS	13.	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFF		Change	Addition	
TITLE	D CONTRACTOR	DELETE	L					CC,,0		
NAME	CROOK, KENT	CHOOK, KEITI		1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS	11701 S.W. 130TH AVE.		1.4 CITY						1	
CITY-ST-ZIP TITLE	MIAMI FL.	☐ DELETE		TITLE	"			Change	Addition	
NAME	CROOK, LINDA	—		IAME						
STREET ADDRESS	11701 S.W. 130TH AVE.		2.3 9	TREET	ADDRESS					
CHTY-ST-ZIP	MIAMI FL		2.4 0	CHTY - S	5T- ZIP					
TITLE	, , , , , , , , , , , , , , , , , , ,	☐ DELETE	3 1	TITLE				Change	☐ Addition	
NAME			321	NAME						
STREET ADDRESS			3.3.	STREE	T ADDRESS					
CITY-ST-ZIP					ST-ZIP			Change	Addition	
TITLE		DELETE		TITLE			Ц	Change	☐ Addition	
NAMÉ				VAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE			ST - ZIP		П	Change	Addition	
TITLE		☐ breeze		5 1 TITLE 52 NAME				•	_	
NAME					TADORESS					
STREET ADDRESS			1	5.3 STREET A 5.4 CITY - ST-						
CITY-ST-ZIP TiTLE		DELETE		TITLE	21 ' £11'			Char ge	☐ Addition	
NAME				NAME						
STREET ADDRESS					T ADDRESS					
OUTY OT 21D			6.4	C(TY-:	SI - 71P					
44 1 do borol	L certify that the information supplied	with this filing is voluntarily fu	rnished and	doe	s not qualify	for the exemption stated in Section 119	3.07(3)(k), Florid	da Statu	ites. I further	

I do hereby certify that the information supplied with this tiling is voluntarily turnished and does not quality for the exemption stated in Section 119.07(5)(k), Florida Statutes. Flurther 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: __

4-26-96 305-385-9379
Daylor Daylore Proce 4