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

PROFIT
CORPORATION
ANNUAL REPORT
1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000023217 (1)

K.C. ELECTRICAL SERVICES, INC.

			1						
Principal Place	of Business	Mailing Address							
11701 S.W. 130TH AVE. MIAMI FL 83196 US		11701 S.W. 130TH AVE. Miami FL 33186-4631 US							
						3. Date Incorporated or Qualified 03/25/1993		te of Last R)1/1996	eport
2. Principal Pl	ace of Business	2a. Mailing Address	:			4. FEI Number		→	oplied For
21		26				65-0411004		No	ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	:			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State						\$5.00 Added t	
Zip 24	Country 25	Ζφ 29	30	untry		This corporation has liability for in Florida Statutes		tax under s] No	. 199.032,
	9. Name and Address of Curren	I Registered Agent				10. Name and Address of New Reg	istered /	gent	
CRO	OK, KENT			81	Name				
	1 S.W. 130TH AVE.		:	62	Street Addr	ress (F.O. Box Number is Not Acceptable)			
MIAI	VII FL 33186		-	-	01.001.1001				
	•		:	83	-, -, -, -, -, -, -, -, -, -, -, -, -, -				
				84	City		FL	85 Zip	Code
agent. I a	egistered agent, or both, in the state in familiar with, and accept the obligation of the state	ations of, Section 607.0505, FI	orida Sta	atutes	5 .	oration submits this statement for the p lion's board of directors. I hereby accep red when reinstating)	DATE	on timent as	registered
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	D	☐ DELETE		1 TITLE				☐ Change	☐ Addition
NAME	CROOK, KENT		121	1 2 NAME					
STREET ADDRESS	11701 S.W. 130TH AVE.		1,3 3	13 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL			1 4 CITY - ST - ZIP					1 4 1 100
TITLE	D DOOK TINDA	☐ DELETE		2 1 TITLE				L Change	☐ Addition
NAME	OROOK, LINDA			2 2 NAME 2 3 STREET ADDRESS					
STREET ADDRESS	11701 S.W. 130TH AVE. MIAMI FL								
CITY-ST-ZIP	MINN CL	DELETE		CITY-: TITLE	ST-ZIP		ñ.	Change	Addition
TITLE NAME	L.J DELETE			3 2 NAME					
STREET ADDRESS			l i		ADDRESS				
CITY-ST-ZIP				3.4. CITY-ST-ZIP					
TITLE		DELETE	4,1 TITU					Change	Addition
NAME			4,2	NAME	-				
STREET ADDRESS			4 3 511		ADDRESS				
CITY-ST-ZIP			444	CITY-S	1 - 2iP				
TITLE		DELETE	5 1	TITLE				Change	Addition
NAME			5,2	NAME					
STREET ADDRESS			5 3	STREET	ADDRESS				
CITY-ST-ZIP				CITY - S	I-ZIP				
TITLE	-	DELETE	1	TITLE				☐ Change	Addition
AUGUS			6 2	116635	1				

14. 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 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 elachment with an address.

6:3 STREET ADDRESS

11.5. 07

FILED

May 16 1997 8:00am

Secretary of State