**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT #

1. Corporation Name

Principal Place of Busin
11701 S.W. 130TH AVE. MIAMI FL 33186
110

## Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90052 020 \*\*\*150.00

N.O. EEE	CTRICAL SERVICES, INC.							
Principal Place	of Business	Mailing Address			i immitägi ilm imimp iliili galli gal	1 48111 <b>48116</b> }	ras (1115 (125)	
11701 S.W. 130		11701 S.W. 130TH AVE.						
MIAMI FL 33186 MIAMI FL 33186					DO NOT WRIT	E IN THIS S	PACE	
US US				3. Date Incorporated or Qualifed				
					03/25/1993			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Apr	olied For
21 26					65-0411004			Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired		<b>\$8.75</b> A	
22 27								<u>.</u>
City & State	City & State	State		Election Campaign Financing     Trust Fund Contribution		\$5.00 Added to		
Zip	Country		Cour	ntrv	8. This corporation owes the curre	nt vear Intai		1 003
<b>⊢</b> , `	25		30	,	Personal Property Tax.			□No
24	9. Name and Address of Current		721		10. Name and Address of New R	egistered A	gent	
				81 Name				1
	OK, KENT	and the second of the second o	<b>-</b>	82 Street Add	dress (P.O. Box Number is Not Acceptal	ole)		
l	1 S.W. 130TH AVE.		ļ					
MIAN	/II FL 33186			83				
				84 City		FL	85 Zip C	Code
		1 007 4500 Ft-14- OL-14-			reception submits this statement for the		hanging its	registered
Affina ar r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	at Florida. Such change was au	unorizea	by the comorat	poration submits this statement for the tion's board of directors. I hereby accep	t the appoint	lment as reg	gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered	Agent signature requir	red when reinstating)	DATE		<u> </u>
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1,1 TIT	LE			☐ Change	☐ Addition
NAME	CROOK, KENT		1					Li Addition
STREET ADDRESS	11701 S.W. 130TH AVE.		1.2 NA	ME				
CITY-ST-ZIP				ME REET ADDRESS				LJ Addizon
	MIAMI FL		1.3 ST					
TITLE	MIAMI FL D	☐ DELETE	1.3 ST	REET ADORESS Y-ST-ZIP			Change	Addition
TITLE NAME	MIAMI FL D CROOK, LINDA	☐ DELETE	1.3 STI	REET ADDRESS Y-ST-ZIP LE	<del></del>			
	MIAMI FL D CROOK, LINDA 11701 S.W. 130TH AVE.	☐ DELETE	1.3 STI 1.4 CIT 2.1 TIT 2.2 NA	REET ADDRESS Y-ST-ZIP LE				
NAME STREET ADDRESS C/TY-ST-ZIP	MIAMI FL D CROOK, LINDA		1.3 STI 1.4 CIS 2.1 TIT 2.2 NA 2.3 STI 2.4 CI	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	MIAMI FL D CROOK, LINDA 11701 S.W. 130TH AVE.	☐ DELETE	1.3 STI 1.4 CB 2.1 TII 2.2 NA 2.3 STI 2.4 CB 3.1 TII	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MIAMI FL D CROOK, LINDA 11701 S.W. 130TH AVE.		1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FL D CROOK, LINDA 11701 S.W. 130TH AVE.		1.3 STI 1.4 CR 2.1 TIT 2.2 NA 2.3 ST 2.4 CG 3.1 TIT 3.2 NA 3.3 ST	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS			☐ Change	☐ Addition
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CITY-ST-ZIP 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: