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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000032663 (5)

GUARDIAN ELECTRIC, INC.

Principal Plac	ce of Business	Mailing Address			I IMPRIBATIVE IDIABLE ITHIN DANNI ABRIK ABRIK ABRIK BELIA
12000 SOUTH TAMIAMI TRAIL. UNIT 1 FT. MYERS FL 33907		12000 SOUTH TAMIAMI TRAIL. UNIT 1 FT. MYERS FL 33907			
			_		3. Date incorporated or Qualified
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
Suite And Frate		26 Suite Apt # etc		····	65-0415459 Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required
City & Sta	te	City & State			6. Election Campaign Financing \$5.00 May Be
23 26		28	B		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032,
24	25		30		Florida Statutes
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
	ISHMAN, ARNOLD H		81	Name	ne
	9 DEER RUN S W		82	Street	eet Address (P.O. Box Number is Not Acceptable)
FJ.	MYERS FL 33908		83		
			84	City	85 Zip Code
				-	
office or agent. Li	t to the provisions of Sections 607,050; registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was a	uthorized by	the co	ted corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Styrial religied or socied have of registered ages	nt and bite it applicable (NOTE	Registered Age	nt signatu	ature required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLE	PD ELEICHBAN COCCODY U	☐ DELETE	1.1 TITLE		Change Addition
NAME	FLEISHMAN, GREGORY H 12000 SOUTH TAMIAMI TRAIL,	HANT 4	1.2 NAME		
STREET ADDRESS	FT. MYERS FL 33907	UNIT	1.3 STREET		\$\$
CITY-ST-ZiP	VP	DELETE	1.4 City - S	T-ZiP	Change Addition
NAME	FLEISHMAN, ARNOLD	Dittit	21 TITLE 22 NAME		Change Addition
STREET ADDRESS	40000 COUTH TAXBARII TOAR		2.3 STREET	ADDDIĆĆ	cc
CITY-ST-ZIP	FT. MYERS FL		2.4 CITY-1		
TITLE	VP DELETE		3.1 TITLE	St - EIL	Change Addition
NAME	FARRELL, JOHN		3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	ss
CITY-ST-ZIP	FT. MYERS FL		3.4. CITY - 9	T - ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET	ADDRESS	ss
CITY-ST-ZIF			4.4 CITY - S	T-ZIP	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET		SS
CITY - ST - ZIP		DELETE	5.4 CITY-S	r - ZiP	
TI"LE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET	ADDRESS	38

64 CITY-ST-ZIP

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 change it; or on an attachment with an address.