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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #**

1. Corporatio	in Name " P9300	10000232 (	U)							
JME ELECTRIC, INC.										
Principal Place of Business Mailing Address							1 100110681 110 f0406 11417 80114 0814 8			11 <b>1</b>
261 GOOLSB	Y BLVD.	261 GOOLSBY BLVI	<b>)</b> .							
DEERFIELD BCH FL 33442 DEERFIELD BCH FL 33442							DÖ NÖT WRIT	E IN TUIC C	BACE	
บร		US				}	3. Date Incorporated or Qualified	E 10 17133		
							08/09/1993			
2. Principal Place of Business 2a. Mailing Addre				-			4, FEI Number		I I A	oplied For
21		26	26				65-0430299		<del>  </del>	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc			;,					M	\$8.75	Additional
22 27							5. Certificate of Status Desired	火	Fee R	equired
City & Stat	City & State City & State						6. Election Campaign Financing	_		Мау Ве
23	28						Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	<u> </u>	ountry	,		8. This corporation owes or has p	7~~		
24 25 29 30							Personal Property Tax due Jun  10. Name and Address of New R			No
9. Name and Address of Current Registered Agent					Name		10. Name and Address of New A	egistereu A	gent	
MATT, JAMIE										
9897 THREE LAKES CR.					Street	Addres	s (P.O. Box Number is Not Accepta	ble)		
BOCA RATON FL 33428										
				83			*.			
				84	City			FL	85 Zip	Code
11. Pursuant office or r agent, I a	to the provisions of Sections 607.0 registered agent, or both, in the Starn familiar with, and accept the ob-	502 and 607.1508, Florida Sate of Florida. Such change ligations of, Section 607.050	Statutes, the was authoria 5. Florida S	above ed by tatutes	e-named the corps.	l corpor poration	ation submits this statement for the n's board of directors. I hereby acce		changing i intment as	ts registered registered
SIGNATURE							·			
Signature, typed or printed name of registered agent and title if appticable. (NOTE: Registere						e required		DATE		
12.		AND DIRECTORS	10				ADDITIONS/CHANGES TO OFF		_	
TITLE	_		1 TITLE				L	Change	Addition.	
NAME	1711 17 17 01 01112		NAME							
STREET ADDRESS	9897 THREE LAKES CR.				ADDRESS					1
CITY-ST-ZIP TITLE				CITY-S	iT-ZIP				Change	Addition
NAME			NAME							
STREET ADDRESS		1			ADDRESS	1				Ι,
CITY-ST-ZIP			1							
TITLE				2. 4 City-ST-ZiP 3.1 Title					Change	Addition
NAME	:		3.2 NAME			ı				
STREET ADDRESS			3.3 STREET ADDRESS						ĺ	
CITY-ST-ZIP				CITY-S						
TITLE			4.1 TITLE					Change	Addition	
NAME			4. 2	NAME	İ		1			
STREET ADDRESS	DDRESS 4.6		4.3 STREET ADDRESS							
CITY-ST-ZIP				CITY-S	T-ZIP					
TITLE		DELETE	5.1	TITLE					Change	☐ Addition

6.4 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 for on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

□ DELETE

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

\_\_\_ Change

**FILED** 

Feb 02 1998 8:00am

Secretary of State