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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000057247 (7)

appears in Block 12 or Block 13 if changed, or on an attachment will

SIGNATURE:

T & M ELECTRIC, INC.

Principal Place of Business

3281 S.W. 21ST STREET

MIAMI-FL 83145-2202 MIAMI FL 33145 P.O. BOX 3501183 MIAMI, FLA. 33135 3. Date incorporated or Qualified 3a. Date of Last Report 02/08/1996 08/16/1993 4. FEI Number 2. Principal Place of Business Applied For P.O. BOX 3501183 65-0530862 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be MIAMI, FL. 28 Trust Fund Contribution Added to Fees 23 Country Country Z_{ip} 8. This corporation has liability for intangible tax under s. 199.032, 33135 DADE Florida Statutes Yes No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MORENO, ANTONIO 3281 S.W. 21ST STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33145** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am farm ar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed harne of region, in agent and offer lapplicates (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Change ☐ Addition THILE 1.1 TITLE MORENO, ANTONIO 1.2 NAME NAME 3281 S.W. 21ST STREET 1.3 STREET ADDRESS STREET ADDRESS MIAM! FL 33145 1.4 CITY-ST-ZIP DiTY - ST - ZiP DELE TE ___ Addition Change TITLE 2.1 TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3 3 STREET ADDRESS 34. CHTY-ST-ZIP CITY - ST - ZIP Addition DELETE Change 4 1 TITLE TITLE 4 2 NAME NAVÉ STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4 4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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