

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000063879 (9)

1. Corporation Name

FOX ELECTRIC, INC.

Principal Place of Business

4330 W BROWARD BLVD
SUITE H
PLANTATION FL 33317
US

Mailing Address

4330 W BROWARD BLVD
SUITE H
PLANTATION FL 33317
US

FILED

96 JUN 24 PM 2:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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-06/24/96--01052--038

3. Date Incorporated 09/08/1993 Date of Filing 05/01/1995

4. FCI Number 59-3215796 Applied For Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 2691 W 81 STREET

26 2691 W 81 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 HIALEAH FL

27 City & State

28 HIALEAH FL

24 Zip 33016

Country

25 U.S.A.

29 Zip 33016

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, DAVID S
8720 N.W. 5TH STREET
#104
PLANTATION FL 33324

81 Name RAMONA P. HOWARD

82 Street Address (P.O. Box Number is Not Acceptable)

83 2691 W 81 STREET

84 City HIALEAH

FL

85 Zip Code 33016

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statutes, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*

TREASURER/SECRETARY/DIRECTOR

DATE 6/20/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C
NAME FOSTER, STEPHEN R
STREET ADDRESS R.R. 1 ORANGEVILLE
CITY-STATE-ZIP ONTARIO, CANADA L9W2Y8

TITLE PTS
NAME FOSTER, DAVID S
STREET ADDRESS 8720 N.W. 5TH STREET, #104
CITY-STATE-ZIP PLANTATION FL 33324

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

1.1 TITLE C
1.2 NAME FOSTER, STEPHEN R.
1.3 STREET ADDRESS 2691 W 81 STREET
1.4 CITY-STATE-ZIP HIALEAH FL 33016

2.1 TITLE PD
2.2 NAME FOSTER, DAVID S.
2.3 STREET ADDRESS 4100 S.W. 84 TERRACE
2.4 CITY-STATE-ZIP DAVIE FL 33328

3.1 TITLE TSV
3.2 NAME HOWARD, RAMONA P.
3.3 STREET ADDRESS 2691 W 81 STREET
3.4 CITY-STATE-ZIP HIALEAH FL 33016

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *[Signature]*

TREASURER/SECRETARY/DIRECTOR

DATE 6/20/96 305-552-1708

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)