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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000074750 (9) DOCUMENT

CARL LAWSON ELECTRIC, INC.

FILED Feb 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										AIS(1 FACA) AI	111 \$011 1001
				1500 NW 118TH AVE. PLANTATION FL				DO NOT WRITI	E IN THIS :	\$PACE	
								 Date Incorporated or Qualified 10/22/1993 	•		
2. Principal Place of Business 2a. Mailing Address								4, FEI Number		A	pplied For
21		26	26				65-0446690		N	lot Applicable	
Suite, Apt.	#, etc.		s	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22		27					5. Certificate of Status Desired		Fee R	tequired	
City & State	e	— —	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution				
Zip Country				Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25			30				Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent						10. Name and Address of New Regi				Agent	
LAWSON, CARL							Name				
150	X NW 118TH				82	Street Add	ress (P.O. Box Number is Not Accepta	ble)			
PU	ANTATION F	•				83					
						84	City		FL	85 Zip	Code
11. Pursuant t	to the provision	ns of Sections 607	0502 and 607	1508. Florida Statu	ites, the a	bove	e-named corr	poration submits this statement for the	ournose of	changing i	its registered
office or re agent. I a	egistered age m familiar with	nt, or both, in the S , and accept the c	tate of Florida bligations of, S	Such change was ection 607.0505, F	authorize Iorida Sta	d by tutes	the corporal	tion's board of directors. I hereby acce	pt the app	ointment as	registered
SIGNATURE	Class a land		decay and blo No	antianhla (NC	TE: Bomistoro	d Acc	or simple so social	red when reinstating)	DATE		;
Signature, typed or printed name of registered agent and title if applicable. (NOTI 12. OFFICERS AND DIRECTORS						13.		ADDITIONS/CHANGES TO OFFI		DIRECTO	BS IN 12
TITLE	D	OT TOETTE	ATTO DITECT	DELETE	1.1 T	TLE		TIDDITION OF THE TITLE OF THE	024107412	☐ Change	Addition
NAME	LAWSON,	CARL		_	12 N					_	
STREET ADDRESS		118TH AVE.			135	TRFFT	ADDRESS	•			
CITY-ST-ZIP	PLANTATI						T-ZIP				
TITLE				DELETE	2.1 11		· • · · · · · · · · · · · · · · · · · ·			Change	☐ Addition
NAME					22 N	AME					
STREET ADDRESS							ADDRESS	٠,	. 15		
CITY-ST-ZIP					2.40	HTY-S	ST-ZIP				
THLE				DELETE	3.1 TI					Change	☐ Addition
NAME					3.2 N	AME					
STREET ADDRESS					3.3 5	TAEET	ADDRESS				
CITY-ST-ZIP					3.4.0	ITY-S	ST-ZIP				
TITLE				DELE TE	4.1 Ti					Change	☐ Addition
NAME					4.2 N	AME					1
STREET ADDRESS					4.3 S	TREET	ADDRESS				l
CITY-ST-ZIP					4.4 CI	TY-S	T-ZIP				
TITLE	_			☐ DELETÉ	5.1 T					Change	Addition
NAME					5.2 N	ME	1				ļ
STREET ADDRESS					5.3 S1	REET	ADDRESS				
CITY-ST-ZIP					5.4 CI						
TITLE				DELETE	6.1 11					Change	Addition
NAME .					6.2 N	AME					
STREET ADDRESS	1				6.3 ST	REET	ADDRESS				
CITY-ST-ZIP					6.4 CI		i i				

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.

12-14-98