

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra S. Murphree  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 20 AM 8:35

DOCUMENT # P93000083674 (0)

1. Corporation Name

PINES ELECTRICAL SERVICES, INC.

Principal Place of Business

Mailing Address

7167 PEMBROKE PINES ROAD  
PEMBROKE PINES FL 33023

7167 PEMBROKE PINES ROAD  
PEMBROKE PINES FL 33023

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/30/1993  
3a. Date of Last Report 05/01/1994

4. FEI Number 65-0416702  
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	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent

BROOKS, EILEEN  
7167 PEMBROKE PINES ROAD  
PEMBROKE PINES FL 33023

10. Name and Address of New Registered Agent

81 Name	ALVIN R. VOTTELER
82 Street Address (P.O. Box Number is Not Acceptable)	7167 Pembroke Rd.
83	
84 City	Pembroke Pines FL
85 Zip Code	33023

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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: *Alvin R. Vottele*  
Signature, typed or printed name of registered agent and title if applicable.

*Alvin R. Vottele*  
NOTE: Registered Agent signature required when registering.

Jan 12, 1995  
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROOKS, EILEEN	1.2 NAME	
STREET ADDRESS	7167 PEMBROKE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33023	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	PRES. ALVIN R. VOTTELER
STREET ADDRESS		2.3 STREET ADDRESS	7131 S.W. 10TH COURT
CITY-ST-ZIP		2.4 CITY-ST-ZIP	PEMBROKE PINES FL 33023
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	VICE PRES ROSEANN M. VOTTELER
STREET ADDRESS		3.3 STREET ADDRESS	7131 SW 10TH COURT
CITY-ST-ZIP		3.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33023
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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 110.07(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: *Alvin R. Vottele* Alvin R. Vottele  
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

1/12/95 (305) 987-2781  
DATE TELEPHONE