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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000088864 (2)

CERTIFIED ELECTRIC OF BROWARD INC.

7027 W BROWARD BLVD #301 PLANTATION FL 33317  2a. Mailing Address  2a. Mailing Address  2b. Mailing Address  2c. Principal Place of Business  2c. Principal Place of Business  2d. Mailing Address  2d. Mailing Address  2d. Mailing Address  2f. Certificate of Status Desired  2f. City & State  2f. City & State  2f. City & State  27. Mailing Address  3d. Date Incorporated or Qualified 12/21/1993  2d. Da												
PLANTATION FL 33017  PLANTATION FL 330172088  2. Principal Placu of Duviness 2. A feeling Address 3. Capturess 3. Date incorporated or Qualified 34. Date of Lists Report 12/21/1998  2. Principal Placu of Duviness 3. Suite, April 4, etc. 3. Suite,		•		ū				ı itacırak ilə kələd ükli dalik delik da	14 MALAL SASAS	10101 13110 EIFE	1 8161 188	<i>I</i> I
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SURPLEASE AND THE PROPERTY OF											eport	
Suit, Apt 4, etc.    Suite, Apt 4, etc.   Suite, Ap	<b>2.</b> Pr	rincipal Place of Busin	ess	2a. Mailing Address			<del>- 1</del>	1 '' '' ''			plied F	or
Coly & State    Coly & State   Coly & Coly & State   Coly & State	21							65-0457575		No.	t Appli	cable
22   22   23   30   30   30   30   30	Suite, Apt. #, etc.							Defliticate of Status Desired				
Zép Country 2/2   2/2   30   30   17/2   18/2   2/2   30   30   18/2   2/2   30   18/2   2/2   3		ity & State							\$5.00	May B	Je	
Poor do Statutos  8. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Street Address (P.O. Box Number is Not Acceptable)  13. Pleasant to this provisions of Statent 607 6002 and 807 1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered different or registered agent, or bright-new State of Florida Such change was authorized by the composition submits the statement for the purpose of changing its registered different registered agent, or bright-new State of Florida Such change was authorized by the composition submits the statement for the purpose of changing its registered different or registered agent, or bright-new State of Florida Statutes.  13. SIGNATURE  14. China State the State of Florida Such change was authorized by the composition submits the statement for the purpose of changing its registered agent agent and the statement of the purpose of changing its registered agent a	23	ın T	Country									
SCHOONOVER, ROBERT 8 SCHOONOVER, ROBERT 8 SES NAY 12TH CT. PLANTATION FL 33313  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 City FL 85 Zip Code  86 City FL 86 Zip Code  86 City FL 87 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  88 City FL 86 Zip Code  89 Zip Code  80 Zip Code  8		· .		<del></del>	¬ ' <del>                                   </del>			ring res				
SCHOONOVER, ROBERT B 8856 MV 12TH CT. PLANTATION FL 33313  11. Pursuant to the provisions of Sections 807 (2002 and 807 1508, Florida Statutes, the above charge was authorized by the corporation submits this statement for the purpose of charging its registered office or registered agent, or right-most State of Florida, Such charge was authorized by the corporation's board of directors. I hereby society the appointment are registered office or registered agent, or right-most statement for the purpose of charging its registered office or registered agent, or right-most statement for the obligations of Section 607 (505, Florida Statutes, the above agent of registered agent of registered agent age	24	******			30]							
Section   Sect			· · · · · · · · · · · · · · · · · · ·	registores Agent	8	31	Name	IV. Hante and Address of Now A	Aibraido	(Baur		
PLANTATION FL 33313  83  84 City FL 85 Zip Code  11. Pureupit to the provisions of Sicilation (97 (200) may 607 1508, Florida Statutes the above-hamed corporation submits this statement for the purpose of changing its registered agent of an fundamental and includes a registered agent of an includer are included agent 1 minutes are provided as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and include a registered agent of an includer are included agent agent and include a registered agent agent and include a registered agent agent agent and include a registered agent												
B3					82 Street Ac			ess (P.O. Box Number is Not Accepta	ble)			
11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or organized agent or bight with 60 forms Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiarism and agraph of the obligations of Socions 607 0505, Florida Statutes.  SIGNATURE    The continue of projects agraph on the displacation   (NDI: Registered Agent signature required when reinitating)   DAFE		DWINION	2 00010		8	3						
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SIGNATURE		office or registered ac	ierii, or both, irrtne Stai	le of Florida. Such change was a	uthorized -	hν	the corporati	ion's board of directors. I hereby acce	ot the appo	ointment as	registe	ered
12				9	ou otato		•		- 413	5197		
THE	SIGN		or printed harne of registeres) a	gent and title of applicable (NOTE	: Registered A	Ager	nt signature requir	ed when reinstating)	DATE	<u> </u>		—
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14. I do 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 per receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name					6.4 CITY	- ST	T-ZIP					
I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name	14.	i do hereby certify tha information indicated (	r the information suppli on this annual report or	ed with this filing does not qualify supplemental annual report is tr	y for the e: ue and ac	xer	mption stated rate and that	I in Section 119.07(3)(i), Florida Statute my signature shall have the same led	es. I further al effect as	certify that if made up	the dericat	th: that
appears in Block 12 or Block 13 if changed on an attachment with an address.		Lam an officer or direc appears in Block 12 o	otor of the corporation r Block 13 if changed	The receiver or trustee empowers an attachment with an add	ered to exi ress.	ecu	ute this repor	t as required by Chapter 607, Florida	Statutes, ar	id that my r	name	,

IATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR