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

DOCUMENT # P9400005150 (5)

FILED May 05 1998 8:00am Secretary of State

HORIZ	ON ELECTRIC, INC.	(2)			.
Principal Plac	ce of Business	Mailing Address		-	i noint diubt kank diidi 4841 (90)
413 SE 16TH FORT LAUDE US	I STREET Erdale FL 33316	413 SE 16TH STREET SUITE 2 FORT LAUDERDALE FL 33316		DO NOT WRITE IN THIS SPACE	
		U\$		3. Date Incorporated or Qualified	
2 Principal F	Place of Business	2a. Mailing Address		01/21/1994 4. FEI Number	
لا7 🕻 🔭	17 DAVIE BLUD,		4512	65-0524411	Applied For Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State 28 FORL LIND.		6. Election Campaign Financing	\$5.00 May Be
23 	Copylity	28 FORL LAU		Trust Fund Contribution	Added to Fees
24 33		十つ こうりつって 上	Country 30 FLORIDA	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
	9. Name and Address of Current		OU (-O POINT	10. Name and Address of New Register	
FILINGS, INC. 81 Name					
3732 NW 16TH STREET 82 Street Address			ss (P.O. Box Number is Not Acceptable)		
F0	PRT LAUDERDALE FL 33311			SS (F.S. BOX Harrison is 1101 Acceptable)	
			83		
1	:		84 City		85 Zip Code
		· · · · · · · · · · · · · · · · · · ·			-L
office or r agent. I a	regi ster ed agent, or both, in the State of am familiar with, and accept the obligat	and our 1908, Florida Statute F Florida. Such change was au ons of, Section 607.0505, Flor	s, the above-named corpo uthorized by the corporation and Statutes.	oration submits this statement for the purpos on's board of directors. I hereby accept the	e of changing its registered appointment as registered
SIGNATURE	Stgnature, typed or pented name of registerna agent	and teen apply able (NOTE	Registered Agent signature required	DAT	re
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 10 LE		Change Addition
NAME	SIOUPERIS, SOCRATES		1.2 NAME		
STREET ADDRESS	\$UITE 214, 5200 NW 31ST AVE	ENUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	····	1.4 C(1Y - ST - Z(P		
TITLE		☐ DELETE	2.1 TITLE	•	☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		POLICIE	2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME Street address			3.2 NAME		•
			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		beerit	4.1 MLE		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City - St - ZIP		
14. I hereby o	certify that the information supplied with	this filing does not qualify for	the exemption stated in Si	ection 119.07(3)(i). Florida Statutes, Lifurther	cortify that the information

14. Thereby 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 for 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 properties of 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 charged or or an attachment with an address.

CICNIATURE.

SOCRATES SIGNAERIS

4. 25. 98 - 954.557800