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Mar 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000030627 (1)

1. Corporation Name
ELECTRICAL SERVICES UNLIMITED, INC.



Principal Place of Business

2263 S W 11 ST
APARTMENT #6
MIAMI FL 33135
US

Mailing Address

2263 S W 11 ST
APARTMENT #6
MIAMI FL 33135-4905
US

3. Date Incorporated or Qualified
04/21/1994

3a. Date of Last Report
02/27/1996

2. Principal Place of Business

21 2263 SW 11 ST

Suite, Apt. #, etc.

22

City & State

23 Miami FL

Zip

24 33135

Country

25 US

2a. Mailing Address

26 2263 SW 11 ST

Suite, Apt. #, etc.

27

City & State

28 Miami FL

Zip

29 33135

Country

30 US

4. FEI Number

65-0486001

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

9. Name and Address of Current Registered Agent

SARRIA, MARVIN M
2263 SW 11 ST
APARTMENT #6
MIAMI FL 33135

10. Name and Address of New Registered Agent

81 Name Marvin M Sarria

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

83 2263 SW 11 ST

84 City Miami

FL

85 Zip Code

33135

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: *Marvin M Sarria*

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SARRIA, MARVIN M
STREET ADDRESS 3219 VIRGINIA STREET, APARTMENT #6
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE VPD ☐ DELETE

NAME SARRIA, FREDY
STREET ADDRESS 3219 VIRGINIA STREET, APARTMENT #6
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE SD ☐ DELETE

NAME SARRIA, DEYANIRA
STREET ADDRESS 3219 VIRGINIA STREET, APARTMENT #6
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE PD ☐ DELETE

NAME SARRIA, MARVIN M
STREET ADDRESS 2263 SW 11 ST
CITY-ST-ZIP MIAMI FL

TITLE VPD ☐ DELETE

NAME SARRIA, FREDY
STREET ADDRESS 2263 SW 11ST
CITY-ST-ZIP MIAMI FL

TITLE SD ☐ DELETE

NAME SARRIA, DEYANIRA
STREET ADDRESS 2263 SW 11 ST
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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: *Marvin M Sarria*

2-17-97 305-642-8787

Date

Daytime Phone #

0168340

CR2E034 (9/96)