SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1996.
AMOUNT DUE ON OR BEFORE 8/0/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 18 AM 8:13

DOCUMENT # **P94000031772 (4)**

1. Corporation Name

TRI-COUNTY ELECTRICAL & SECURITY CONTRACTORS, IN C.

Principal Place of Business	Mailing Address
6570 GRIFFIN RD SUITE 105 DAVIE FL 33314	6570 GRIFFIN RD SUITE 105 DAVIE FL 33314

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/27/1994
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 65/0497266 ☐ 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. The corporation has liability for intangibles under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SPATZ, MARK M
1222 SE 3RD AVE
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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: JOHN E GONDOLA, JR. 6/13/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (Change / Addition)	
TITLE	DP	11 TITLE	DV
NAME	SPATZ, MARK	12 NAME	GONDOLA, JOHN
STREET ADDRESS	1222 SE 3RD AVE	13 STREET ADDRESS	1222 SE 3RD AVE.
CITY-ST-ZIP	FT LAUDERDALE FL 33316	14 CITY-ST-ZIP	FT LAUDERDALE 33316
TITLE	DV	21 TITLE	DT
NAME	CIRAACO, JOE	22 NAME	HALL, JOHN
STREET ADDRESS	1222 SE 3RD AVE	23 STREET ADDRESS	1222 SE 3RD AVE.
CITY-ST-ZIP	FT LAUDERDALE FL 33316	24 CITY-ST-ZIP	FT. LAUDERDALE 33316
TITLE	DT	31 TITLE	
NAME	GONDOLA, JOHN	32 NAME	
STREET ADDRESS	1222 SE 3RD AVE	33 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33316	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 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: JOHN E GONDOLA, JR. 6/18/95 305 321-6200
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #

00Y4046 CR

CR2E034 (3/95)