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 #

P94000041063 (6)

1. Corporatio GULFS Principal Place	TREAM ELECTRICAL CON	ISTRUCTION CORP. Mailing Address				
12864 BISCAYNE BLVD. 12864 BISCAYNE BLVD.						
#267 #267 NORTH MIAMI FL 33181-2007 NORTH MIAMI FL 33181-2			2007		DO NOT WRITE IN THIS	SPACE
NORTH MIAMI FL 33181-2007 NORTH MIAMI FL 331			2007		3. Date Incorporated or Qualified	
					05/27/1994	
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21	1 26				65-0497805	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #,					5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Continuate of Otalica Desired	Fee Required
City & Stat	е	<u></u>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Counts	 	Trust Fund Contribution LJ	Added to Fees
Zip	1-3 ' 1-3 ' 1-3		<u></u>	Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	Name and Address of Curr	29 29 Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	
AI.	VARO, JOHN		81	Name	10. 110. 110. 110. 110. 110. 110. 110.	
	111 BISCAYNE BLVD			<u></u>		
#610			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
	AMI FL 33181		83			
••••	THE STATE OF THE S					
			84	City	FL	85 Zip Code
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable (NOT)	E: Registered Ag		orporation submits this statement for the purpose or oration's board of directors. I hereby accept the appropriet in the purpose of the purpo	
12.	OFFICERS A	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
TITLE	ALVORD, JOHN	T) percit	1.1 TITLE			L_ Change L_ Adollon
NAME ATREET ARRESTO	44444 DIOOSINE DIAM		1.2 NAME	1000000		
STREET ADDRESS	MIAMI FL 33181		1.3 STREET	1		
CITY-ST-ZIP	VD	DELETE	1.4 CITY - S 2.1 TITLE	51-ZIP		Change Addition
NAME	MITCHELL, ROBERT	Peccit	2.1 THE			
STREET ADDRESS	4007 NE 113 ST		2.3 STREET	ADDRESS		
CITY-ST-ZIP	AGISTIC CL COACA		2. 4 CITY -			
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		·	4.4 CITY- S	ST-ZIP		· <u></u>
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME	-		
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	ST-ZIP		D 4 2 3 90
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME CZOCEZ ADDOCCO			6.2 NAME			

14. I 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.

11/00

ZME ABOND

FILED

Apr 27 1998 8:00am

Secretary of State