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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400069339

CANDIELITE ELECTRICAL SERVICE INC

CANDLL	LITE ELECTRICAL SERVICE,	1140			
Dringing Diggs	of Business	Mailing Address			# (MOTIONAL TEAM SERVI STATE) OBEST OBSTE OBTION ONLY OBSTE OBSTE OBST
9172 CHERRY DRIVE 9172 CHERRY DR GROVE CITY FL 34224 GROVE CITY FL 34224 US US					, DO NOT WRITE IN THIS SPACE
••					3. Date Incorporated or Qualifed
					09/16/1994
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0515806 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be
23	,	28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible
24	25	29 30	<u> </u>		Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
	V 1571110 0 15		81	Name	
PACK, ARTHUR G JR				Street	t Address (P.O. Box Number is Not Acceptable)
VENICE FL. 34292 Grove CITY, Fl. 34224			82		
VEN	CEFL34292 Grove C	ITY, Fl. Quand	83		
		21229	84	City	85 Zip Code
	•			,	FL
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstatung) DATE					
12.	OFFICERS AND		13.	t signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change ☐ Addition
NAME	PACK, ARTHUR G		1.2 NAME		
	888 NO HAVANA ROAD			ADORESS	s 9172 Cherry Dr.
STREET ADDRESS	VENICE-FL		1.4 CITY-S		Grove C.TY, FC. 34224
CITY-ST-ZIP	SD	☐ DELETE	2.1 TITLE	1-21	Change
	PACK, ANNETTE		2.2 NAME	١	
NAME	886 NO-HAVANA ROAD			ADDRESS	S CARROLL NO. 1
_STREET ADDRESS	VENICE-FL		2, 4 CITY-S		Grove city, FC 34224
CITY-ST-ZIP		☐ DELETE	3.1 TITLE	1-27	Change Addition
TITLE	^		3.2 NAME		
NAME	t + a		3.3 STREE	r ADDDESS	•
STREET ADDRESS	• •				S .
CITY-ST-ZIP	<u> </u>	☐ DELETE	3.4. CITY-S 4.1 TITLE	11-ZIP	Change Addition
TITLE			4. 2 NAME		
NAME					
STREET ADDRESS				T ADDRESS	5
CITY-ST-ZIP		□ DELETE	4.4 CITY-S	T-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		- Change - Addition
NAME					
STREET ADDRESS				T ADDRESS	9
CITY-ST-ZIP		C Science	5.4 CITY-S 6.1 TITLE	1-24	☐ Change ☐ Addition
TITLE	Mary Consultation	☐ DELETE			Country Country
NAME (1	就在我看一起在 题 。 1945年 — 1945年		6.2 NAME		
STREET ADORESS	No. 15 To Table 1		6.3 STREE	ADDRESS	8

CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90099 038 ***150.00