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

Feb 27, 1999 8:00 am Secretary of State 02-27-1999 90012 025 ***155.00

FILED

DOCUMENT # **P94000089165**1. Corporation Name

ROAD RUNNER ELECTRIC, INC.

Principal Place	e of Business	Mailing Address				(1010 85101 0151 1001
2640 SW 79 CT 2640 SW 79 CT						
MIAMI FL 33155 MIAMI FL 33155						
US US					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed 12/08/1994	
					12/00/1994 4, FEI Number	Applied For
2. Principal Place of Business 21 47355W74AVC 22 47355W			7	HAVR		Not Applicable
Suite, Apt. #, etc., Suite, Apt. #, etc. 22 M/AM/ FC 27 M/AM/ F			_		F Cordiferate of Status Decired	5 Additional Required
City & State 23 33人	55 DADE	City & State — 28 33/55	D,	sle	· · · · · · · · · · · · · · · · · · ·	00 May Be ed to Fees
Zip	Country		untry		8. This corporation owes the current year Intangible	
24	25	29 30			Personal Property Tax.	□No
	9. Name and Address of Curre	ent Registered Agent	T.		10. Name and Address of New Registered Agent	
0114	DEZ ALDEDTO D		81	Name		
SUAREZ, ALBERTO P 2640 SW 79 CT			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
	WI FL 33165		83	<u> </u>		
					. last	Zip Code
			84	City	-	•
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes, the	above	-named corpo	oration submits this statement for the purpose of changin on's board of directors. I hereby accept the appointment a	its registered s registered
office or re agent. I a	egistered agent, or both, in the Stat m familiar with, and accept the oblig	pations of, Section 607.0505, Florida Sta	itutes.	uie corporador	in a board of directors. Thereby accept the appointment	5 (58,0.0.22
SIGNATURE						
	Signature, typed or printed name of registered ag			signature required	(when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
12.	DP OFFICERS P		MLE		□ Cha	
TITLE	SUAREZ, ALBERTO P		NAME			_
NAME	2640 SW 79 COURT			ADDRESS		Ì
STREET ADDRESS	MIAMI FL					ļ
CITY-ST-ZIP	DS DS		CITY-ST TITLE	-ZIP	Cha	nge
TITLE	DE ARMAS, GILBERTO	_				•]
NAME				ADDDEDC		
STREET ADDRESS.	9020 SW 45TH ST MIAMI FL 33165	l l		ADORESS		
CITY-ST-ZIP			CITY-S	1-ZIP	. □ Chà	nge Addition
NAME		_	NAME		•	
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP		3.4.	CITY-S	T-ZIP		
TITLE		☐ DELETE 4.1	TITLE		Cha	nge
NAME		4.2	NAME			
STREET ADDRESS	:	4.3	STREET	ADDRESS		1
CITY-ST-ZIP			CITY-ST	r-ZIP		
TITLE			ITTLE		☐ Cha	nge 🗀 Addition
NAME			NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			CITY-ST	-ZIP	☐ Cha	nge Addition
TITLE	 	☐ DELETE 6.11	HILE		L] Çna	ige Modition
	i e					
NAME STREET ADDRESS		•	VAME	ADDRESS		,

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 supplied 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.

SIGNATURE: