## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$59 00. PROFIT Apr 10 1998 8:00am FLORIDA DEPARTMENT STATE CORPORATION Sandra B. Morth **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORA IONS 1998 DOCUMENT # P95000000025 (3) SAM'S ELECTRIC SERVICE, INC. Mailing Address Principal Place of Business 918 ROOSEVELT AVENUE NORTH LEHIGH FL 33972 918 ROOSEVELT AVENUE NORTH LEHIGH FL 33936 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1995 2. Principal Place of Business 2a. Mailing Address Applied For 65-0544861 21 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name STUMBO, DARRYL V 918 ROOSEVELT AVENUE NORTH 82 Street Address (P.O. Box Number is Not Acceptable) LEHIGH FL 33936 City 85 Zip Code 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 Forida. 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 obligation of Section 607.0505, Florida Statutes. SIGNATURE Registered Agent signature required when reinstating) and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFIC AS AND DIRECTORS DELETE Change 1 1 TITLE STUMBO, DARRYL V 1.2 NAME

12. TITLE NAME 918 ROOSEVELT AVENUE NORTH 1.3 STREET ADDRESS STREET ADDRESS LEHIGH FL 22830 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE 5.1 Title TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change ■ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET 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 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 of powered 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 a press.

CITY-ST-ZIP

DARLYL V. STUMBO