FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham, Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # P9500 ERSAL LIGHTING, INC.		17379 (5)								
Principal Place of Business Mailing Address								1 FUNKENNA IIN ENNI BEIRI UNAIL DI				
3116 N. FEDERAL HIGHWAY SUITE 367 LIGHTHOUSE POINT FL 33064 2. Principal Place of Business 2 21			3116 N. FEDERAL HIGHWAY SUITE 367 LIGHTHOUSE POINT FL 33064 2a. Mailing Address 26									
							3. Date Incorporated or Qualified 3a. Date of Last Report 03/02/1995			eport		
								4. FEI Number 65-0572696	•		Applied For Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			tr	5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State 23 Zip Country		27	ity & State					Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
		7	7 φ	Cou	ountry			8. This corporation has liability for		ngible tax under s 199.032,		
24 25 9. Name and Address of Current			Language 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		T			Florida Statutes M Yes No 10. Name and Address of New Registered Agent				
C T CORPORATION SYSTEMS 1200 S. PINE ISLAND RD. PLANTATION FL					81 82 83	Street Ad	Ronald N. Rosenwasser, P.A. Address (P.O. Box Number is Not Acceptable) One Boca Place suite 234W 2255 Glades Road					
•	· · · · · · · · · · · · · · · · · · ·				84	City		a Raton,	FL	85 Zir	3431	
or registere familiar with SIGNATURE	o the provisions of Socions 807, 050; ad agent, or both, in the State of Fight h, and accept the abligations of Society Synatics upped or british name of registered agent in	707.0	506 Florida Statutes.	1/2	9/26	named corp oration's bo / / at signature requi		ion submits this statement for the pu of directors. I hereby accept the app the registating	pose of cha ointment as	anging its n registered	egistered offic agent. I arn	
12.	OFFICERS AND DIRECTO			13.				ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12	
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STREET ADDRESS				6.3 S	TREET	ADDRESS					11 52	

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)(k), 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 path; that I am an officer or director of the coloreration or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607.

SIGNATURE SHONATURE SHOWATE OF SHOWING OF SH

954-786-9894 Daytime Phone #