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		000028541	(7)		
THEK	(ELECTRIC, INC.			A TRUMBAN TIB HEYEN BURN BANK BA	HIT BOUR BOUR HOOF HAID BAIR BIDEN HOU HEAL
Principal Place of Business		Mailing Address			
12207 S.W. 133RD COURT MIAMI FL 33186		12207 S.W. 133RD COURT MIAMI FL 33186			
	••••	MINMI FE 33100		Date Incorporated or Qualified	3a. Date of Last Report
		·		04/07/1995	FIRST REPORT
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0573104	Applied for
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for Fiorida Statutes Yes	Intangible tax under s. 199.032, S
	Name and Address of Cu	rrent Registered Agent		10. Name and Address of New I	Registered Agent
LAINIO	MADOADET		81 Name		
LAINO, MARGARET 12207 S.W. 133RD COURT			82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
	FL 33186		83		
			84 City		BE Zin Code
11 Pursuant	to the provisions of Spatiana 607.6	502 1 607 1500 51- 1- 0-	"		FL 85 Zip Code
	red agent, or both, in the State of F ith, and accept the obligations of, S			ration submits this statement for the pured of directors. I hereby accept the app	rpose of changing its registered office ointment as registered agent. Lam
SIGNATURE	ar, and accept the obligations of, a	seamon boy oolds, Florida Starut	ES		- *
12.	Signation typed or printer name of no prior 13		NCTE Tempherest Agent superture visipare		DATE
TITLE	D D OFFICERS	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	
NAME	LAINO, MARGARET	tenant	1.2 NAME		Change Addition
STREET ADDRESS 12207 S.W. 133RD COURT		श	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33186		14 CITY - ST ZIP		1
TITLE		☐ DELETÉ	2 1 THLE		Change Addition
NAME CIRCE ADDRESS			2.2 NAME		
STREET ADDRESS CITY+ST+ZIP			2.3 STREET ADDRESS		
TITLE			2.4.0(1Y ST-ZIF 3.1.1(1LE		
NAME		vere it	3 2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CPY+ST-ZP		
TITLE		DELETE	4 1 TUTLE		Change Addition
NAME			4.2 NAME		
\$1REET ADDRESS			4.3 STREET ADDRESS		· •
CITY - ST - ZIP			4 4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TIFLE		☐ Change ☐ Addition
NAME STREET ADDRESS			5 2 NAME		
CITY-ST-ZIP			5 3 STREET ADDRESS		
TITLE		DELETE	5.4 CITY - ST - ZIP		
NAME		_ мин	6 1 JULE 62 NAME		Change Addition
STREET ADDRESS			6.3 STREET ADDRESS		
CiTY-SI-ZiP			6 4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filling 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 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE

SIGNATURE

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1 - /6 - 96 (36) 251 7080

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