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

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P95000028541 (7)

Country

25

LAINO, MARGARET 12207 S.W. 133RD COURT

**MIAMI FL 33186** 

TREK ELECTRIC, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zìp

Principal Place of Business	Mailing Address
12207 S.W. 133RD COURT MIAMI FL 33186	12207 S.W. 133RD COURT MIAMI FL 33186

9. Name and Address of Current Registered Agent

**FILED** Jan 21 1998 8:00am Secretary of State



☐ Yes

8. This corporation owes or has paid the current year Intangible

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

04/07/1995

65-0573104

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30,

10. Name and Address of New Registered Agent

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

			83					
			84	City	FL	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 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 reinstating)  QATE								
12.	OFFICERS AND DIRECTORS		13.	nt signat	ure required when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND E	MECTO	DBS IN 12	
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NAME	LAINO, MARGARET		1.2 NAME			_ •		
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CITY - ST - ZIP	MIAMI FL 33186		1.4 CITY-S					
TITLE		☐ DELETE	2.1 TITLE			Change	Addition	
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NAME			6.2 NAME					
STREET ADDRESS		Į.	6.3 STREET	ADDRESS	<i>i</i>		-	
CITY-ST-ZIP	and the Alexander of th		6,4 CITY - ST	- ZIP				

Country

Name

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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 incloated 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.

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Not Applicable