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**

DOCUMENT # P95000033869 1. Corporation Name

STARLING ELECTRIC INC.

ncipal Place of Business	Mailing Address
1904 HARTMAN ROAD	1904 HARTMAN ROAD
FT PIERCE FL 34947	FT PIERCE FL 34947

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90007 010 ***150.00



<u> </u>									
Principal Pla	ice of Business	Mailing Add	ress					1019E [] 8E 1 E]	
1904 HARTMAN ROAD FT PIERCE FL 34947 FT PIERCE FL 34947				DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed			
						04/26/1995			
2. Principal	Place of Business	2a. Mailing A	Address			4. FEI Number			Applied For
21		26				59-3312727			Not Applicable
Suite, Ap	t. #, etc.	Suite, Ap	ot. #, etc.			5. Certifcate of Status Desired			Additional
22		27	<u></u>			S. Commodic of Contrast Boomer		Fee	Required
City & Sta	ate	City & Si	ate			6. Election Campaign Financing	П		0 May Be
23		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip		ountry		8. This corporation owes the cur	rent yea		Ċ
24	25	29	30			Personal Property Tax.	Daulata	Yes	_ □No
	9. Name and Address of Curr	ent Registered Age		81	Name	10. Name and Address of New	registë	red Agent	
STA	ARLING, WILLIAM A	n in tuli burshiribu i kurb			1401110				
	22 SUNRISE BLVD			82	Street Addre	ess (P.O. Box Number is Not Accept	able)		
	PIERCE FL 34982			83			<u> </u>		48 800 B. 140
• • •	TIETIOE TE OTIONE			63					
				84	City	<u> चर्च होते होते हो स्वीत्रहेत होते हो</u>	1 1981	85 Zi	p Code
<u> </u>	·								
office or	t to the provisions of Sections 607.0 registered agent, or both, in the Stat	te of Florida. Such c	hange was authorize	ed by ti	-named corpo he corporatio	oration submits this statement for the in's board of directors. I hereby acce	purposi pt the ap	e of changing oppointment as	its registered registered
agent. I	am familiar with, and accept the obli-	gations of, Section 6	:07.0505, Florida Sta	atutes.	•	•	•		-
SIGNATURE									·
12.	Signature, typed or printed name of registered a	AND DIRECTORS	(NOTE: Registere		signature required	ADDITIONS/CHANGES TO OF	DATE		TOPS IN 12
TITLE	PD			TITLE		-·	TIOLING	Chang	
NAME	STARLING, WILLIAM A	-		NAME	-				

STREET ADDRESS	1			STREET A					
CITY-ST-ZIP TITLE	FT PIERCE FL 34982 VST		■ 1.4 0						
	(i i i i i		7	CITY-ST-	ZIP			Chang	a
NAME	STARLING, BONNIE L		DELETE 2.1 T	TITLE	ZIP			☐ Chang	e Addition
STREET ADDRESS	- 2200 CHADICE DIVID		DELETE 2.1 T	TITLE NAME				☐ Chang	e Addition
CITY-ST-ZIP	1-44		DELETE 2.1 T 2.2 M 2.3 S	TITLE NAME STREET A	ADORESS			☐ Chang	e Addition
TITLE	s 3322 SUNRISE BLVD FT PIERCE FL 34982	grander og grander og de	DELETE 2.1 1 2.2 N 2.3 S 2.4 4	TITLE NAME STREET A CITY-ST	ADORESS		·		
NAME I	FT PIERCE FL 34982	grander og grander og de	22N 23S 2.41 DELETE 3.1T	TITLE NAME STREET A CITY-ST-	ADORESS		·	☐ Chang	
NAME	FT PIERCE FL 34982	grander og grander og de	2.11 2.2N 2.3S 2.41 DELETE 3.1T 3.2N	TITLE NAME STREET A CITY-ST- TITLE NAME	ADORESS : - ZIP	· · · · · · · · · · · · · · · · · · ·	<u>.</u>		
STREET ADDRESS	FT PIERCE FL 34982	grander og grander og de	2.11 22N 2.35 2.41 3.11 3.2 N 3.35	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A	ADORESSZIP				
STREET ADDRESS	FT PIERCE FL 34982		2.11 22N 2.35 2.41 3.11 3.2 N 3.35 3.4.4	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST-	ADORESSZIP			Chang	e Addition
STREET ADDRESS CITY-ST-ZIP	FT PIERCE FL 34982		2.11 22N 2.35 2.41 3.11 3.2N 3.35 3.4.1 DELETE 4.11	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST- TITLE	ADORESSZIP		* * * * * * * * * * * * * * * * * * *	Chang	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	FT PIERCE FL 34982		2.11 2.2A 2.3S 2.41 3.1T 3.2A 3.3S 3.4.4 3.DELETE 4.1T 4.21	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST- TITLE NAME	ADDRESS ADDRESS -ZIP			Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	FT PIERCE FL 34982		2.11 2.2A 2.3S 2.41 3.1T 3.2A 3.3S 3.4.4 3.DELETE 4.1T 4.21	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST- TITLE	ADDRESS ADDRESS -ZIP			Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FT PIERCE FL 34982		2.11 2.28 2.38 2.41 3.17 3.28 3.38 3.4.4 3.00 3.10 3.10 3.10 3.10 3.10 3.10 3.10	TITLE NAME STREET A CITY-ST. TITLE NAME STREET A CITY-ST. TITLE NAME STREET A CITY-ST.	ADDRESS ADDRESS ADDRESS			☐ Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	FT PIERCE FL 34982		2.11 2.2N 2.3S 2.41 3.11 3.2N 3.3S 3.4. 3.DELETE 4.11 4.21 4.3S 4.40 3.DELETE 5.17	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST- TITLE	ADDRESS ADDRESS ADDRESS			Chang	e Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	FT PIERCE FL 34982		2.11 2.28 2.38 2.41 3.17 3.28 3.38 3.4.4 1 DELETE 4.17 4.21 4.38 4.40 1 DELETE 5.17 5.28 5.38	TITLE NAME STREET A CITY-ST- TITLE NAME	ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP			☐ Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FT PIERCE FL 34982		2.11 2.28 2.38 2.41 3.17 3.28 3.38 3.4.4 3.00 3.00 3.00 3.00 3.00 3.00 3.0	TITLE NAME STREET A CITY-ST- TITLE NAME	ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP			Chang	e Addition
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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 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP