FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000038047 (3)**

1. Corporation Name

A PLUS ELECTRIC SERVICES, INC.

Principal Place of Business	Mailing Address
10740 S.W. 172ND STREET MIAMI FL 33157	10740 S.W. 172ND STREET MIAMI FL 33157

3. Date Incorporated or Qualified: **05/12/1995**

3a. Date of Last Report: 1-17-96

4. FEI Number: 65-0584018 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Same	26 Same
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	29 Zip
25 Country: USA	30 Country

9. Name and Address of Current Registered Agent

TELFORT, FRANTZ
10740 S.W. 172ND STREET
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name: N/A.
82 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 of Current Registered Agent (If Changing) — Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	D ☐ DELETE	1 Title	☐ Change ☐ Addition
Name	TELFORT, FRANTZ Pres.	2 Name	
Street Address	10740 S.W. 172ND STREET	3 Street Address	N/A.
City-St-Zip	MIAMI FL 33157	4 City-St-Zip	
Title	☐ DELETE	2 Title	☐ Change ☐ Addition
Name	Frantz Telfort	2 Name	
Street Address	Vice Pres. Same.	2 Street Address	
City-St-Zip		2 City-St-Zip	
Title	☐ DELETE	3 Title	☐ Change ☐ Addition
Name	Sandra Telfort.	3 Name	
Street Address	Treasurer Same.	3 Street Address	
City-St-Zip		3 City-St-Zip	
Title	☐ DELETE	4 Title	☐ Change ☐ Addition
Name	Frantz Telfort	4 Name	
Street Address	Secretary Same	4 Street Address	
City-St-Zip		4 City-St-Zip	
Title	☐ DELETE	5 Title	☐ Change ☐ Addition
Name		5 Name	
Street Address		5 Street Address	
City-St-Zip		5 City-St-Zip	
Title	☐ DELETE	6 Title	☐ Change ☐ Addition
Name		6 Name	
Street Address		6 Street Address	
City-St-Zip		6 City-St-Zip	

CR2E034 (12/95)

14. I 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)(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.

SIGNATURE: Frantz Telfort — 1-17-96 (305) 255 8258

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

339-1281