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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000055082 (8)

HASS ELECTRIC CONTRACTORS, INC.

Princinal	Place of	Business
i i i i i i i i i i pai	1 1000 01	Ough Rose

Mailing Address

FILED Aug 04 1997 8:00am Secretary of State



NAPLES PL 33		NAPLES FL 34103-3264				
!					3. Date incorporated or Qualified 07/10/1995	3a. Date of Last Report 06/13/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 5860	e 10 TH AVENUE S.W	[26] SAM	ø.		65-0608416	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			E Contificate of Chatra Desired	\$8.75 Additional
22	<u> </u>	27			5. Certificate of Status Desired	Fee Required
City & State		City & State	_		6. Election Campaign Financing	\$5.00 May Be
23 NAPL	ES FLORIDA	28 SAMP	<u> </u>		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	У	8. This corporation has liability for	intangible tax under s. 199.032,
24 341	((25	29 JAME	30		Florida Statutes	☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New R	egistered Agent
HA\$	S, GARY J		8	l Name		
-1181	HERNANDO STREET 584	6 10 TH AVE. S	$\cdot \omega$. \mid_{8}	Stroot	Address (P.O. Box Number is Not Accepta	blo
NAP	LES FL 35040 34166		"	Sileet.	Address (1:0: box Number is Not Accepte	15/6)
	3 110 G		8:	3		
			8	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607 1508. Florida Statu	ites, the abo	/e-named	corporation submits this statement for the	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was	authorized t	y the corp	corporation submits this statement for the poration's board of directors. I hereby acce	ept the appointment as registered
	in tarmilar with, and accept the oblig	ations of, Section 607.0505, F	iorida Statuti	38.		
SIGNATURE	re, typed or printed name of registered ag	(NO and tale of any leading the tool and	TE: Docietored A	on singet up	e required when reinstating)	ATE
12.		D DIRECTORS	13.	gent signature	ADDITIONS/CHANGES TO OFF	
TITLE	D	DELETE	1.1 711LE		ADDITIONS/GITANGES TO GIT	Change Addition
NAME	HASS, GARY J		1.2 NAME			Est change nouncom
STREET ADDRESS	1181 HERNANDO STREET			1 ADDRESS	COLL INTH AVENUE S	'.ω'.
CITY-ST-ZIP	NAPLES FL 33940				SELL 10TH AVENUE S NAPLES FLORIAA	2/12//
TITLE	1174 000 1 0 000 10	DELETE	1.4 CITY - 2.1 TITLE	ST-ZIP	NAPLES PLORIUM	Change Addition
		L. DELETE				Change Addition
NAME			2.2 NAME			
STREET ADDRESS				1 ADDRESS		
OUTY, ST-ZIP		Dece	2.4 CITY	-ST-ZIP		
TITLE`		☐ DELETE	3.1 TITLE			Change Addition
NAME	*		3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4 2 NAM	:		
STREET ADDRESS			4.3 STREE	1 ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	51 TITLE			Change Addition
NAME			5 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE	6.1 TITLE	31-1H		Change Addition
NAME			6.2 NAME			En overige
			ı			
STREET ADDRESS			4	I ADDRESS		
CITY+ST-ZIP			6.4 CITY-	ST-ZIP	L	

I do hereby certify that the information supplied with this filling 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 priorit or supplemental a final report is true and accurage and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the cornication or the country it trusted empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name