

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

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000058103 (9)
1. Corporation Name
SURE ELECTRICAL CONTRACTORS INC.



Principal Place of Business 2150 SW 26TH STREET STE 2 MIAMI FL 33133	Mailing Address 2150 SW 26TH STREET STE 2 MIAMI FL 33133-2445
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2. Principal Place of Business 21 17725 S.W. 144 AVE Suite, Apt. #, etc. 22 City & State 23 Miami, FL Zip 24 33177 Country 25 Dade	2a. Mailing Address 26 17725 S.W. 144 AVE Suite, Apt. #, etc. 27 City & State 28 Miami, FL Zip 29 33177 Country 30 Dade	3. Date Incorporated or Qualified 07/25/1995	3a. Date of Last Report 07/26/1996
		4. FEI Number 65-0601362	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent DOMINQUEZ, ROBERTO M 2150 SW 26TH STREET STE 2 MIAMI FL 33133	10. Name and Address of New Registered Agent 81 Name Roberto M. Dominguez 82 Street Address (P.O. Box Number is Not Acceptable) 17725 S.W. 144 AVE 83 84 City Miami FL 85 Zip Code 33177
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new address is in Block 10

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's signature required when re-stating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	DOMINQUEZ, ROBERTO M	1.2 NAME	Roberto M. Dominguez
STREET ADDRESS	2150 SW 26TH STREET STE 2	1.3 STREET ADDRESS	17725 S.W. 144 AVE
CITY-ST-ZIP	MIAMI FL 33133	1.4 CITY-ST-ZIP	Miami FL 33177
TITLE	V	2.1 TITLE	V
NAME	DOMINQUEZ, JANNETTE	2.2 NAME	Jannette Dominguez
STREET ADDRESS	2150 SW 26TH STREET STE 2	2.3 STREET ADDRESS	17725 S.W. 144 AVE
CITY-ST-ZIP	MIAMI FL 33133	2.4 CITY-ST-ZIP	Miami FL 33177
TITLE	V	3.1 TITLE	
NAME	CASTRO, RAUL	3.2 NAME	
STREET ADDRESS	785 SW 101 COURT CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

CR2E034 (9/96)