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

PROFIT CORPORATION ANNUAL REPORT

1997

The state of the s



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000084530 (1)

WELL ELECTRIC, INC.

## FILED Apr 18 1997 8:00am Secretary of State



Principal Place of Business				Mailing Address					F JEBLIDDE 110 (010) BILLI BALLI				
81 BOUTHWEST 52 COURT				61 SOUTHWEST 52 COURT									
MIAMI FL 3313	4		MIAM	II FL 33134-1129									
( <u></u>									3. Date Incorporated 11/03/1995	or Qualified	3a, Date 08/05	of Last F 5/1996	Report
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		- <del></del>	Aı	pplied For
21 6/8	5 m -	26	26 Same					65-0616752			N	ot Applicable	
Suite, Apt.		S	Suite, Apt. #, etc.					5. Certificate of Statu	e Desired		\$8.75	Additional	
22				27					6. Certinoste di Statt		LI	Fee R	equired
City & State	Som	C	City & State					6. Election Campaig	n Financing	_	\$5.00	May Be	
	Jan		28						Trust Fund Contrib				to Fees
Zip	ļ	Country	7	ip	<u> </u>	ountry	,		8. This corporation h				s. 199.032,
24		25	29		30				Florida Statutes		Yes 🔽		
A A ####		and Address of Curre	nt Register	red Agent	<u> </u>	81	Nic	ıme	10. Name and Addre	SS Of New He	gistered A	gent	
	L, TONY					61	148	une					
61 SW 52 CT						82	Ştı	eet Addre	dress (P.O. Box Number is Not Acceptable)				
MIAI	MI FL 33134	•				-	<u> </u>						
						83							
						84	Cit	y			F-1	<b>85</b> Zip	Code
							L				FL	<u> </u>	
11. Pursuant	to the provisi	ons of Sections 607.056	02 and 607 e of Florida	.1508, Florida S Such change v	tatules, the vas authoriz	ed ba	e-nar / the	ned corpo corporatio	oration submits this state on's board of directors.	ement for the p I hereby accer	urpose of c it the appoi	:hanging i ntment as	its registered registered
agent. I a	ım familiar wit	th, and accept the obliq	gations of, S	Section 607.050	5, Florida St	alutes	S			,			
SIGNATURE												<b></b>	
	Signature, typed	or printed name of registered as OFFICERS AN					ont sig	nature require	d when reinstating) ADDITIONS/CHANI	CER TO OFFIC	DATÉ EDC AND I	DECTO	DC IN 12
12.	PSTD	OFFICERS AI	VU DINECTI	DELETE	13	TITLE			ADDITIONS/CHAIN	aca to offic		Change	Addition
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STREET ADDRESS					6.3	STREET	ADDR	ESS					
CITY-ST-ZIP		4				CITY-S							
	by cortify that	the information supplied	od with this	filing door not o				on stated	in Section 119 07/3)(i)	Florida Statute	. Hurther o	ertify that	the

4. 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.

MANATURE TOWN VILL TOWN VOL

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