SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P95000085437 (8) D & D ELECTRIC, INC. Principal Place of Business Mailing Address 1551 NW BIST AVE 1551 NW BIST AVE PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024 3. Date Incorporated or Qualified 3a. Date of Last Report 11/07/1995 Principal Place of Business Mailing Address 2я 4. FEI Number 21 Applied For 26 9 65 - 061 - 9 233 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. 22 \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing 23 \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zio Zip Country This corporation has liability for intangible tax under s 199 032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DELUCIA, KEITH 81 Name 1551 NW 81ST AVE Street Address (PO. Box Number is Not Acceptable) PEMBROKE PINES FL 33024 **B3** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Styrature, typed or passed name of respectived agent and title if applicable (NOTE Respected Agent signature required when renstating) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE (36/8)DELETE Change Addition NAME DELUCIA, KEITH 1.2 NAME STREET ADDRESS 1551 NW 81ST AVE CR2E034 13 STREET ADDRESS PEMBROKE PINES FL 33024 CITY - ST - ZIP 14 CITY - ST - ZIP TITLE DELETE 2 | TITLE ___ Change | Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City - St - ZiP TITLE DELETE 3 1 THILE Change Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY - ST - ZIP 34 CITY - ST-ZIP TITLE DELETE 4.1 fiftE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 ! TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 5.4 CrTY - ST - ZIP TITLE DELETE 61 TIFLE Change Addition NAME 6 2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CHTY - ST - ZIP 14. I do 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)(k). Florida Statutes I further certify that the information indicated on this argular report or supplemental annual report is true and accurate and that my sign after shall have the same legal effect as if that my name appears in Brock 2 or Block 3 if charged or on an attachment with an address.

Kerth DeLucia

SIGNATURE:

6-11-96 954-431-9769