SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Jul 29 1997 8:00am

Secretary of State

(561) 747-3437

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000019329 (7)

LYNCH ELECTRIC INC.

Delegand Disco of Duckeys														
Principal Place of Business Mailing Address														
6318 MULLIN STREET						22410								
TALM DENVIT ONTIFETO PE 33416				PALM BEACH GARDENS FL 33418					DO NOT WRITE IN THIS SPACE					
									3. Date Incorporated or Qual	ified :	3a. Date	of Last F	Report	
								i	02/29/1996		151	YEAR	FILEIN	
2. Principal Place of Business				2a. Mailing Address					4 FEL Number				oplied For	
21				28					65064887	5		N	ot Applicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desire				Additional	
22				27					e. Commodic or clarge besite			Fee R	equired	
City & State				City & State				١ ١	Election Campaign Financing \$5.00 May Be					
23				28					Trust Fund Contribution Added to Fees					
Zip	· — ·			Zip Country				8. This corporation owes or has paid the current year Intangible						
24	A Alama	25 29 30 9, Name and Address of Current Registered Agent						Personal Property Tax due June 30. PYes No 10. Name and Address of New Registered Agent						
1/55		***	rent Hegis	red Agent 81			Name	1	U. NEME and Address of Ne	w Kegis	tered Aç	ent	-	
KEEFE, JOHN G 521 SO FEDERAL HIGHWAY							INALLIC							
				82			Street	Address	ddress (P.O. Box Number is Not Acceptable)					
LAK	E ÓMHIU	FL 33460		83										
						"3								
						64	City				1	85 Zip	Code	
44 6	. 0 :		2500 1 0	03.4500 56-33-06-4	4 4 1	LJ		(N		FL			
l office or re	egi ste red ac	ent, or both, in the St	ate of Flori	da. Such change was	authorize	d by	the corr	poration's	tion submits this statement for s board of directors. I hereby	accept th	ne appoi	nanging : ntment as	registered	
agent. I ar	m fa miliar w	ith, and accept the ob	oligations o	f, Section 607.0505, F	Iorida Stat	tutes	S.		1.3				Ť	
SIGNATURE	Clearly on types	for existed name of the object	Lance and the	Fanolisable /AIC	TE: Dogletore	d Ano	nt signatura	o required ud	lion rolnstat.ng)		DATE			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg. 12. OFFICERS AND DIRECTORS							ar, signature	e teduled w	ADDITIONS/CHANGES TO			IBECTO	3S IN 12	
TITLE		0.7702.10		☐ DELETE	13.	TLE	P	I				Change	Addition	
NAME				1.2 NAME			,	Ro	BERT E. LYNCH			_ •	_	
STREET ADDRESS				1.3 ST/			ADDRESS	ADDRESS G318 MULLIN St. P.B.G., FLA. 33418						
CITY-ST-ZIP							1.4 CHTY-ST-ZIP		.G., FLA. 3341	3				
TITLÉ						2.1 1ITLE						Change	Addition	
NAME						2.2 NAME								
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CITY-ST-ZIP				4.4 CITY-ST-ZIP]							
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NAME					6.2 NA	ME	ſ						-	
STREET ADORESS					6.3 \$1	REET	ADDRESS							

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 comporation 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 attaching it with an address.