

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

FILED
Jun 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000044775 (0)

1. Corporation Name
MATADOR ELECTRIC, INC.

Principal Place of Business

924 SLIGH BLVD
ORLANDO FL 32806

Mailing Address

924 SLIGH BLVD
ORLANDO FL 32806-1027



3. Date Incorporated or Qualified

05/20/1996

3a. Date of Last Report

2. Principal Place of Business

21 4177 L.B. McLeod Rd
Suite, Apt. #, etc.

2a. Mailing Address

26 4177 L.B. McLeod Rd
Suite, Apt. #, etc.

4. FEI Number

59-3380587

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

City & State

23 Orlando, FL

City & State

28 Orlando, FL

Zip

24 32811

Country

Zip

29 32811

Country

30

9. Name and Address of Current Registered Agent

FAHERTY, JAMES P
924 SLIGH BLVD
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 4177 L.B. McLeod Rd

84

City Orlando

FL

85 Zip Code 32811

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE DPT
NAME FAHERTY, JAMES P
STREET ADDRESS 924 SLIGH BLVD
CITY-ST-ZIP ORLANDO FL 32806

☐ DELETE

TITLE DVS
NAME BROWN, JOHN
STREET ADDRESS 924 SLIGH BLVD
CITY-ST-ZIP ORLANDO FL 32806

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE

SIGNATURE REQUIRED

CR2E034 (9/96)