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

PROFIT CORPORATION ANNUAL REPORT

1998

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

FILED
98 OCT -9 AM 5:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000048490 (2)**

1. Corporation Name
ING ELECTRIC MECHANICAL SUPPLY CO., INC.

Principal Place of Business	Mailing Address
2121 CORPORATE SOAURE BLVD. STE 223 JACKSONVILLE FL 32216 US	4555 MANSELL ROAD STE 300 ALPAHRETTA GA 30202 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 106 Hibiscus Suite, Apt. #, etc. 22 City & State 23 Ft MEYERS FLA. Zip 24 33931 Country 25 USA	2a. Mailing Address 26 PO BOX 2545 Suite, Apt. #, etc. 27 City & State 28 Alpharetta, GA Zip 29 30023 Country 30 USA.

3. Date Incorporated or Qualified: 06/06/1996

4. FEI Number: 55-3389090 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

F & L CORP.,
200 LAURA STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D	☒ Change ☐ Addition
NAME	GAWLAK, ALBERT A		1.2 NAME	GAWLAK, ALBERT	
STREET ADDRESS	2757 WHITE OAKJ LAN3E		1.3 STREET ADDRESS	10660 KINGSMARK TRL	
CITY-ST-ZIP	JACKSONVILLE FL 32207		1.4 CITY-ST-ZIP	ALPHARETTA, GA 30022	
TITLE	D	☐ DELETE	2.1 TITLE	300000266:38:PS:	☐ Change ☐ Addition
NAME	GRAY, ROBERT		2.2 NAME	-10/14/98--01065--008	
STREET ADDRESS	225 BRIGHT WATER COVE		2.3 STREET ADDRESS	****150.00 ****150.00	
CITY-ST-ZIP	ALPHARETTA GA 30302		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ELLIS, LEE		3.2 NAME		
STREET ADDRESS	1 MAYBECK PLACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	ELSAH IL		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	B. 10/12 98AR	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. I 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]

I N G

Wednesday, September 30, 1998

Florida Department of State
409 E. Gains Street
Tallahassee, Florida 32399

Gentlemen,

Enclosed, please find our check #8586 in the amount of $150.00 for our annual filing fee. This is our second attempt to pay this. Our original check dated April 21, 1998 is still outstanding; therefore has not been cashed by your office. Please also advise if you show payment made.

Sincerely,

Kimberly Gawlak
Office Manager

flori1.wpd

ING
Electric/Mechanical Supply Co. Inc.

GEORGIA HEADQUARTERS:
3555 Mansell Road, Suite 300
Alpharetta, GA 30022
Phone 770-521-4255
FAX 770-521-4277

FLORIDA DIVISION OFFICE:
702 Lemonwood Drive
Oldsmar, FL 34677
Phone 813-852-9808
FAX 813-854-2608

TENNESSEE DIVISION OFFICE:
606 E Emory Street
Powell, TN 37849
Phone 423-947-5950
FAX 423-947-0203