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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000049003 1. Corporation Name

1999

DAYLIGHT ELECTRIC, INC.

Principal Plac	ce of Business	Mailing Address		— i reginear da izino zhik enki zoud brair oi	#### #################################
1403 POINT COURT 1403 POINT COURT					
LUTZ FL 33549 LUTZ FL 33549					
				DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualifed	
O Deinstead D	Ness of Dissipance	A Mailing Addrson		06/05/1996	1 [
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		59-3422789	Not Applicable \$8.75 Additional
22	,, 5.6.	27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zîp	Country	Zip	Country	8. This corporation owes the current year	Intangible
24	25	29	30	Personal Property Tax.	Yes □No
	Name and Address of Current	ent Registered Agent		10. Name and Address of New Register	ed Agent
	I ABOUATE O		81 Name		
	.L, MICHAEL G 3 POINT COURT		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
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LUI	Z FL 33549		83	17 高级 18 20 高级 18 20 18 18 18 18 18 18 18 18 18 18 18 18 18	
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and the second of the	Style Co.	·			L
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered
l ourse or s	registered agent, or both, in the otal	e or rionua. Such change was au			politiment da regiaterea
agent. I a	am tamiliar with, and accept the oblig	gations of, Section 607.0505, Flori	ida Statutes.		
agent. I a			ida Statutes.	•	
agent. I a	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE: I	ida Statutes. Registered Agent signature require	ad when reinstating) DATE	
agent. I a SIGNATURE 12.	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE: I	ida Statutes. Registered Agent signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
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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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 09, 1999 8:00am

Secretary of State 02-09-1999 90016 049 ***150.00