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

**PROFIT CORPORATION** ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000058919 (7)

POWER AND MORE ELECTRIC, CORP.

## **FILED** Feb 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									. 19811987 119 14118 41111 42111 42111	••••	<b>5</b> , 14.75 15.57	1010 1011 1001	
1840 WEST 49TH STREET STE 605 1840 WEST 49TH STREET HIALEAH FL 33012 HIALEAH FL 33012									DO NOT WRIT	E IN THIS	SPACE		
									3. Date Incorporated or Qualified				
									07/11/1996				
2. Principal Pi	ace of Busin	iess	28.	2a. Mailing Address					4. FEI Number		A	pplied For	
21				26					<u>59-3395636</u>	Not Applicable			
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired				
City & State				City & State					6. Election Campaign Financing		\$5.00	) May Be	
23				28					Trust Fund Contribution			to Fees	
Zip Country				Zip Country				8. This corporation owes or has paid the current year Intangible					
24	25			9 30					Personal Property Tax due June 30. 🔀 Yes 🗌 No				
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent						
M/A	LAGON, J	ORGE A				81	Name						
18-	40 WEST 4			82	Street A	Addres	ddress (P.O. Box Number is Not Acceptable)						
HI	ALEAH FL :	33012				83							
						84	City			FL	<b>85</b> Zip	Code	
44 5	4		07.0500 4.60	7 SEAR Florida Chat	dos the s		L samed	201001	ation submits this statement for the		f changing	ite registered	
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	<u> </u>									DATE			
Signature, typed or printed name of registered agent and title if applicable (NOTE: R							egistered Agent signature requ		ADDITIONS/CHANGES TO OFF		DIBECTO	RS IN 12	
12.	D.	OFFICE	NO AND DIREC	DELETE	1.1 1	ITI F			ADDITIONS/CHANGES TO OFF	IOLIIO AIRI	Change	Addition	
NAME MALAGON, JORGE A					1.2 N								
STREET ADDRESS 2903 NE 163RD STREET STE							ADDRESS	SS 1020 NE 111 STREET		7			
***************************************		MI BEACH FL					ST-ZIP		AMI, FL. 33161				
CITY-ST-ZIP TITLE	114-1111			DELETE	2.1 T		,1-21	<u> </u>			Change	Addition	
NAME					2.2 N	AME	İ						
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TITLE				DELETE			3.1 TITLE			****	Change	Addition	
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******	CITY-ST-ZIP				3.4. CITY - ST - ZIP								
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STREET ADDRESS					5.3 S	TAEET	ADDRESS						
CITY-ST-ZIP					5.4 C	ITY-S	ST-ZIP						
TITLE				☐ DELETE	61 T						Change	Addition	
NAME					6.2 N	AME						- 1	
STREET ADDRESS					635	TAEET	ADDRESS					İ	
CITY-ST-ZIP					64C	ITY-S	ST-ZIP						
14 I hereby n	ertify that th	e information sum	nlied with this fi	ling does not qualify				d in Se	ection 119.07(3)(i), Florida Statutes.	I further co	ertify that the	e information	

indicated on this annual report or supplies with this time does not quarry or the exemption stated in declared in declared in the control of 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.

h9/48 (305)64317