

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

FILED

Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000067021 (1)**

1. Corporation Name

TEPAS ELECTRIC, INC.



Principal Place of Business 711 NORTH O ST LAKEWORTH FL 33460	Mailing Address 711 NORTH O ST LAKEWORTH FL 33460
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1615 Arlington DR Suite, Apt. #, etc.		2a. Mailing Address 26 1615 Arlington DR Suite, Apt. #, etc.		3. Date Incorporated or Qualified 08/08/1996	
22 City & State 23 West Palm Beach FL		27 City & State 28 West Palm Beach FL		4. FEI Number 65-0697468	
24 33406		25 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29 33406		30 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent

**TEPAS, PAUL E
711 NORTH O ST
LAKEWORTH FL 33460**

10. Name and Address of New Registered Agent

81 Name PAUL E TEPAS
82 Street Address (P.O. Box Number is Not Acceptable) 1615 Arlington DR
83
84 City West Palm Beach FL
85 Zip Code 33406

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 **Paul E. Tepas**

DATE **4-12-98**

Signature, typed or printed name of registered agent, if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEPAS, DONNA C 711 NORTH O ST LAKEWORTH FL 33460	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Donna Tepas 1615 Arlington DR West Palm Beach FL 33406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEPAS, DONNA C 711 NORTH O ST LAKEWORTH FL 33460	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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:

Donna Tepas

4/13/98 5:23 PM

CR2E034 (10/97)