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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000067680 (4)

MS. CABLE & WIRE INSTALLATIONS, INC.

Principal Place of Business Mailing Address 552 N.E. 35TH STREET 552 N.E. 35TH STREET FORT LAUDERDALE FL 33334 FORT LAUDERDALE FL 33334-2114 3. Date incorporated or Qualified 3a. Date of Last Report 08/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0714110 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zψ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LEAGUE, ANDREA J 552 N.E. 35TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33334 83 City RA 85 Zip Code 11. Pursuant to the previsions 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. THE □ DELETE 1.1 TITLE Change Addition LEAGUE, ANDREA J NAME 1.2 NAME CR2E034 552 N.E. 35TH STREET 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33334 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CHY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP C(1Y-\$1-2)F DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STAFET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHY-\$1-202 DELETE Addition 6.1 TITLE Change TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - \$1 - 70P

14. Los 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 eath; 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: Landway, Largue ANDREA J. LEF

Dayt me Pluone #

FILED

Apr 03 1997 8:00am

Secretary of State