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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000068656 (3) DOCUMENT #

NOR-TEC ELECTRIC, INC.

FILED Apr 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 501 SW PRADO AVENUE 501 SW PRADO AVENUE PORT ST LUCIE FL 34983 PORT ST LUCIE FL 34983 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/15/1996 Principal Place of Busi 2a. Mailing Address 4. FEI Number Applied For 65-0690190 26 Not Applicable Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country This corporation owes or has paid the current year Intangible Name and Address of Current Registered Agent Yes 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 NORTON, BARRY **501 SW PRADO AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) PORT ST LUCIE FL 34983 63 84 City Zip Code 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statutes, the above-nemed 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) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change TITLE NORTON, BARRY NAME 12 NAME **501 SW PRADO AVENUE** 1.3 STREET ADDRESS SYREET ADDRESS PORT ST LUCIE FL 34983 CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE Addition Change TITLE 2.1 TITLE DELANO, JOANN NAME 2.2 NAME 501 SW PRADO AVENUE STREET ADDRESS 2.3 STREET ADDRESS PORT ST LUCIE FL 34983 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE DELENO, JOSEPH NAME 3.2 NAME 213 SW LUCERO DR STREET ADDRESS 3.3 STREET ADDRESS PT ST LUCIE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITI F 4.1 TITLE NORTON, JANET NAME 4. 2 NAME 1055 RIVER RD, 708 STREET ADDRESS 4.3 STREET ADDRESS **EDGEWATER NJ** CITY-ST-ZIP 4.4 City-St-ZiP DELETE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TAILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7/P 64 CITY-ST-7IP

14. Thereby 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 trust relempowered 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 attacking it with an address.

SIGNATURE:

3/31/9×