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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000093658 (8)

1. Corporation Name

B & L ELECTRIC, INC.



Principal Place of Business

1572 TIOGA AVENUE
CLEARWATER FL 34616

Mailing Address

POST OFFICE BOX 14114
ST. PETERSBURG FL 33733-4114

3. Date Incorporated or Qualified
11/12/1996

3a. Date of Last Report
4/22/97

2. Principal Place of Business

21 1521 S. Missouri Ave.
Suite, Apt. #, etc.

2a. Mailing Address

26 1521 S. Missouri Ave
Suite, Apt. #, etc.

4. FEI Number
65-0712601

Applied For
Not Applicable

22 STE A
City & State

27 STE A
City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Clearwater, FL
Zip Country

28 Clearwater, FL
Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 34616
Zip Country

25 Pinellas
Zip Country

29 34616
Zip Country

30 Pinellas
Zip Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LOUIS, LOUIDOL
1572 TIOGA AVENUE
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

81 Name Louidol Louis
82 Street Address (P.O. Box Number is Not Acceptable)
1521 S. Missouri Ave
83 STE A
84 City Clearwater
85 Zip Code FL 34616

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

Louidol Louis
Louidol Louis President

4-23-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME LOUIS, LOUIDOL
STREET ADDRESS 1572 TIOGA AVENUE
CITY-ST-ZIP CLEARWATER FL 34616

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME MEHL, ROBERT M
STREET ADDRESS 1572 TIOGA AVENUE
CITY-ST-ZIP CLEARWATER FL 34616

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

4-23-97 (813) 461-228

CR2E034 (9/96)