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

Mailing Address

18441 CAYMAN STREET EUSTIS FL 32736-2410

PROFIT
CORPORATION
ANNUAL REPORT

1997

Principal Place of Business

18441 CAYMAN STREET

EUSTIS FL 32736



FLORIDA DEPARTMENT OF STATE

FILED

Mar 17 1997 8:00am

Secretary of State

3a, Date of Last Report

3. Date Incorporated or Qualified

12/02/1996

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000098298 (8)

GORDON PESHEK ELECTRIC, INC.

2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. 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 Zφ Country $Z_{\rm IP}$ Country This corporation has liability for intangible tax under s. 199.032, 24 25 30 Florida Statutes Yes No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PESHEK, GORDON **18441 CAYMAN STREET** 82 Street Address (P.O. Box Number is Not Acceptable) **EUSTIS FL 32736** 83 84 City Zip Code 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 Signature, type a respirated name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 11TITLE Pres TITLE Gordon Peshek 18441 Cayman Street Eustis FL 32726 1.2 NAME NAME STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP CITY - ST- ZIP DELETE Change Addition TITLE 21 TITLE 22 NAME NAME STREET ADDRESS 23 STREET ADDRESS CHY-ST-ZP 2 4 CITY-ST-ZIP DELETE Change Addition THILE 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS City - \$1 - 7IP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE THUE 4 2 NAME NAV! 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP City - St - ZiP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME MAMS STREET ADORESS 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY: \$1-28 DELETE Change Addition 61 TITLE THLE NAME 6.2 NAME 6.3 STREET ADDRESS 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.