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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

4	MENT # P9700(ELECTRIC INC.	0002128 (1))	
Principal Place of Business		Mailing Address		
7900 TATUM WATERWAY DR.		7900 TATUM WATERWAY DR.		
#403 MIAMI BEACH FL 33141		#403 Miami Beach FL 33141		DO NOT WRITE IN THIS SPACE
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				01/09/1997
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0728730 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution Added to Fees
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	g. Name and Address of Curren		[30]	10. Name and Address of New Registered Agent
BE	AULIEU, FRANCOIS		81 Name	
7900 TATUM WATERWAY DRIVE			82 Street	Address (P.O. Box Number is Not Acceptable)
#403			220	SW 9" AUR.
MIAMI BEACH FL 33141			83	310
			84 City	85 Zio Code
			'	7/118/09/21E FL 33009
11. Pursuant to office or re	to the provisions of Sections 607.050. egistered agent, or both, in the State	2 and 607.1508, Florida Statu of Florida Such change was	ites, the above-named authorized by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I ar	m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes.	, , , , , ,
SIGNATURE .	Signature typed or printed name of registered ager	ot and blo diagnicable (NC	TF: Registered Agent signature	s required when reinstating) DATE
12,	OFFICERS AND		13.	ADDITIONAL INTERPRETATION AND CIPEOTORS IN IA
TITLE	P	DELETE	1.1 TITLE	BEAULIEU FRANÇOIS Change Addition
NAME	BEAULIEU, FRANCOIS		1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33141		1.4 CITY-ST-ZIP	Hallandale FL. 33009
TITLE		☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	-	☐ DELET E	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP	Change Addition
TITLE NAME			6.1 TITLE 6.2 NAME	Communication of Automotive Communication Auto
STREET ADDRESS			6.3 STREET ADDRESS	
CITY . CT . 7IP			6.4 CITY, ST., 7IP	

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 logal 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.

FILED

Feb 11 1998 8:00am

Secretary of State