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



FILED

FILE NUW: FILING FEE I	AFIER MAT 1911	9 9000.00	TIEED
PROFIT CORPORATION	Sandra S	RTMENT OF STATE	Apr 30 1998 8:00am
ANNUAL REPORT 1998	7.7	ry of State CORPORATIONS	Secretary of State
DOCUMENT # P9700	0018813 (0)		
WILCOX ELECTRICAL SERVICES INC.			
			A CERNICO E ALC CENTA COMO ACUAL DONA DONA DELLA CONTRA NACIONAL CONTRA
Principal Place of Business	Mailing Address		1 Jahridd in 1011 in 1911 after after after and inter 1510 in 1916 tond the 1661
1811 STEPHENS LANE 1811 STEPHENS LANE DOVER FL 33527 DOVER FL 33527			
DOYEN PE 33327		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	02/24/1997 4. FEI Number Applied For
21	26		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State	City & State		Fee Required 6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zıp	Country	8. This corporation owes or has paid the current year Intangible
24 25 25 26 Name and Address of Curre	29 29 Acent	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
L&J BUSINESS SERVIVES INC 81 Name			
A			dress (P.O. Box Number is Not Acceptable)
SUITE I			the state of the s
BRANDON FL 33511 83			
		84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.050	02 and 607 1508, Florida Statute	es, the above-named cor	
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 XWYU. U	OUY 51	zerry H.	Wilcox 7/4/98
	ont and title if applicable (NOT) ID DIRECTORS	F Registered Agent signature requ	uired when reinslating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIME Descident	DELETE	1.1 TITLE	Change Addition
muse a the tablear		1.2 NAME	
STREET ADDRESS 1811 3 1-4 Prens	- ^	1.3 STREET ADDRESS	
TITLE Vice President	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Change Addition
MILE Vice-President	L DILLETE	2.1 TILE 2.2 NAME	
STREET ADDRESS 1811 Stephens. LA	•	2.3 STREET ADDRESS	
CITY-ST-ZIP DOVER FL 3353	7	2. 4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	Change Addition
NAME PERSTANDAGE		3.2 NAME 3.3 STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		34. CITY-ST-ZIP	
TITLE	DELETE	41 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Addition
NAME	frad Passer	52 NAME	- State South
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME CTREET ADDRESS		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	

14. Thereby certify that the information supplied with this filling 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:

Sherry A Wilcox //20/98 8/3-659-75-80