

TILL NOW, FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT
CORPORATION
ANNUAL REPORT
1998**

 FLORIDA DEPARTMENT OF STATE
 Sandra S. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT #
 Corporation Name

P97000019426

(0)

TRI POWER ELECTRIC CORP.

FILED

98 MAY -4 PM 12:07

 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

 1650 W 44 Pl #116B
 Hialeah, Fla 33012

 226 East 45 Street
 Hialeah, Fla 33013

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02-25-97

4. FEI Number

65-0745150

 Applied For
 Not Applicable
5. Certificate of Status Desired ☐
 \$5.75 Additional
 Fee Required

 6. Election Campaign Financing
 Trust Fund Contribution ☐

 \$5.00 May Be
 Added to Fee

 8. This corporation owes or has paid the current year Intangible
 Personal Property Tax due June 30. ☐ Yes ☐ No

1. Principal Place of Business

3a. Mailing Address

 21 1650 W 44 Pl #116B
 Suite, Apt. #, etc.

 29 226 East 45 Street
 Suite, Apt. #, etc.

 23 City & State
 Hialeah, Fla 33012

 31 City & State
 Hialeah, Fla 33013

 34 Zip Country
 33013

 32 Zip Country
 33013 Dade

9. Name and Address of Current Registered Agent

 MARTINEZ NELSON R
 1650 W 44 Pl # 116B
 Hialeah, Fla 33012

10. Name and Address of New Registered Agent

 81 Name Nelson R Martinez
 82 Street Address (P.O. Box Number is Not Acceptable)
 226 East 45 Street

 84 City Hialeah, Fla FL 86 Zip Code
 33013

 11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

 SIGNATURE *Nelson R Martinez* NELSON R MARTINEZ APRIL 29, 1998

Signature, typed or printed name of registered agent and title if appropriate DATE: Registered Agent signature required when re-issuing

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
Director	Nelson R Martinez	President	226 East 45 St
226 East 45 Street, Hialeah, Fla 33013		Hialeah, Fla 33013	
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
Director	Maria E Martinez		
226 E. 45 St, Hialeah, Fla 33013			
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

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 ****150.00 ****150.00

14. 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 included 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 all attachment with an address.

 SIGNATURE: *Nelson R Martinez*
 Signature and typed or printed name of signing officer on corporation

APRIL 29, 1998 305- 5586535

Date Daytime Phone # 8848422