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

DOCUMENT # P9700020234 (5)

NATIONAL ELECTRICAL MANUFACTURERS REPRESENTATIVE S ASSOCIATION-FLORIDA CHAPTER, INC.

FILED Feb 23 1998 8:00am Secretary of State



						::	AIR 1881	
Principal Place of Business Mailing Address							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1550 MADRUGA AVE STE 120 1550 MADRUGA AVE STE 120 CORAL GABLES FL 33146 CORAL GABLES FL 33146					DO NOT INDITE IN THE ODAGE			
				<u>-</u>	DO NOT WRITE IN THIS SPACE			
					Date Incorporated or Qualified 03/05/1997			
Principal Place of Business Address Mailing Address			×	4	. FEI Number	ppli	ied For	
21 8576	N.W. 68 STREET	26 8570 N.W. 68 STREET		7		V Not ₽	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			. Certificate of Status Desired	\$8.75 Add	ditional	
22 27					. Continuate of Status Desired	Fee Requ	ired	
City & Stat	e	City & State		e	Election Campaign Financing	\$5.00 Ma	ау Ве	
23	AMI, FL	20	FL		Trust Fund Contribution	Added to F	Fees	
Zip 33/	Country	Zip	Country	8	 This corporation owes or has paid 	d the cu <u>rre</u> nt year I <u>nta</u> ng	gible	
24 22/	66 25 US		30 U		Personal Property Tax due June		40	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent				
RIVLIN, MARK L				Name E	NELSON			
1550 MADRUGA AVE STE 120				Street Address (P.O. Box Number is Not Acceptable	e)		
CORAL GABLES FL 33148				% ACT	TON BUSCIRICAL	SAKS THE		
				83 8570 NW 68 STREET				
			84 (City	7700 61 572661	les 7:0 Co.		
			[64]	IN MIA	em/	FL 85 35 CO	66	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-n	amed corporati	on submits this statement for the pu	rpose of changing its n	egistered	
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 appointment as registered agent. I am familiar with and accept the appointment as registered								
1/2/00								
SIGNATURE	Signature, typed or printed name of registered agent			signature required who	en reinstating)	DATE	I.	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS I	N 1/2	
TITLE	D	DELETE	1.1 TITLE	ED	WARD F. NELSOI		Addition	
NAME	MILLER, BUDDY		1.2 NAME	PRO	FIDENT		[7	
STREET ADDRESS	6701 SW 116 COURT #210		1.3 STREET AD	DRESS 857	TO NW G8 ST			
CITY-ST-ZIP	MIAMI FL 33173		1.4 CITY-ST-Z		IAMI, FC BOIL	:6		
TITLE		DELETE	2.1 TITLE	550	CY-TREASURER	Change	Addition	
NAME			2.2 NAME	Da	W WACKER		_	
STREET ADDRESS			2.3 STREET AD	neres 5/2	N WACKER PUERTH COURT			
CITY-ST-ZIP			2.4 CITY-ST-		mente Speings, FL 32	201		
TITLE		DELETE	3.1 TITLE	ZII PETRI	HIEFTO OFCINGS, FO JC		Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADI	DOLOG				
							1	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- ST-2 4.1 TITLE	ZIP		Change	Addition	
		D been				change	_ Addition	
NAME			4. 2 NAME				1	
STREET ADDRESS			4.3 STREET AD	1			-	
CITY-ST-ZIP			4.4 CITY-ST-Z	IP .			Tadees	
TITLE		L DELETE	5.1 TITLE			L_ Change L	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADI	DRESS				
CITY-ST-ZIP			5.4 CITY-ST-2	riP				
TITLE		DELETE	6.1 TITLE			Change _	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADD	DRESS				
CITY-ST-ZIP			6.4 CITY - ST - Z	iP .				
						24 27 21 2 2 A 4		

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 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 empower 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 applicable.

CIGNATURE.

6. Oluk 11

WELSON PASSING 2/1/98 305592-7340