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May 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000022590 (8)

1. Corporation Name

MYERS ELECTRICAL SERVICE INC.

Principal Place of Business

1728 NE 49 CT  
POMPANO BEACH FL 33064

Mailing Address

1728 NE 49 CT  
POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1997

4. FEI Number

65-0736780

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

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

2. Principal Place of Business

21 7311 N.W. 16 CT.

Suite, Apt. #, etc.

City & State

23 Landerhill, FL.

Zip

24 33319

Country

25 U.S.A.

2a. Mailing Address

26 7311 N.W. 16 CT.

Suite, Apt. #, etc.

City & State

28 Landerhill, FL.

Zip

29 33319

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

MYERS, PETER  
1728 NE 49 CT  
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

Peter Myers

82

Street Address (P.O. Box Number is Not Acceptable)

7311 N.W. 16 CT.

83

84

City

Landerhill

FL

85 Zip Code

33319

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 Peter Myers

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-23-98

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MYERS, PETER  
STREET ADDRESS 1728 NE 49 CT  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE V ☐ DELETE

NAME MYERS, SONIA  
STREET ADDRESS 1728 NE 49 CT  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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: Peter J. Myers

4-23-98 (954) 747-9102

CR2E034 (10/97)