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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000033464 (3)

POWER POINT ELECTRIC CORPORATION

## **FILED** Mar 02 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						
450 NE 37TH	ST	450 NE 37TH ST	**			
BOCA RATON			BOCA RATON FL 33431			DO NOT WOLFF IN THIS SPACE
						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
2. Principal Place of Business 2a. Mailing Address						04/11/1997 4. FEI Number Applied For
21	ace of Boshicss	26	<b>∤</b> · · · <sub>1</sub>			65-0755844 Not Applicable
Suite, Apt.	#. etc		Suite, Apt. #, etc			SR 75 Additional
22		<u> </u>	27			5. Certificate of Status Desired Fee Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution Added to Fees
Zip	Country	Zφ	Cou	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔼 Yes 🔲 No
	g, Name and Address of Currer	nt Registered Agent		1		10. Name and Address of New Registered Agent
MARCONIS, PATRICK J				81	Name	
450 NE 37TH ST				82 Street Address (P.O. Box Number is Not Acceptable)		
BO	CA RATON FL 33431					· · · · · · · · · · · · · · · · · · ·
				83		
				84	City	85 Zip Code
						FL 8 24 000
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						
				pistered Agent signature required when reinstating)  DATE  ADDITIONS/CHANGES TO DESCREES AND DIRECTORS IN 12		
12.	DP OFFICERS AN	DELETE	13.	TIC		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	MARCONIS, PATRICK J	LJ DITTE		1.2 NAME		
NAME Street address	450 NE 37TH ST				ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33431				T-ZIP	
TITLE	DST	DELETE	2.1 TI		1-21	Change Addition
NAME	MARCONIS, KATHLEEN C		2.2 N			
STREET ADDRESS	450 NE 37TH ST	·			ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33431				ST-ZIP	
TITLE	V	DELETE	3.1 Tí		· -:	Change Addition
NAME	CARON, STEPHEN L		3.2 N	AME		CARON, STEPHEN L
STREET ADDRESS	450 NE 37TH ST		3.3 \$1	TREET	ADDRESS	CARON, STEPHEN L 2900 NE 10 TERR.
CITY-ST-ZIP	<b>BOCA RATON FL 33431</b>		3.4, 0	HY-S	T-ZIP	POMPANO BUH FL- 33064
TITLE		DELETE	4.1 31	TLE		Change Addition
NAME			4. 2 N	AME		
STREET ADDRESS			4.3 S	reet	ADDRESS	
CITY-ST-ZIP			4.4 CI	TY-S	7-ZIP	
TITLE		☐ DELETE	5.1 TI	TLE		Change Addition
NAME			5 2 N	AME		
STREET ADDRESS			5 3 S	TAEET	ADDRESS	
CITY-ST-ZIP			5.4 CI		T-21P	
TITLE		☐ DELETE	617(			Change Addition
NAME			6.2 N			
STREET ADORESS			6.3 ST	REET	ADDRESS	
CITY-ST-ZIP			6.4 CI			11. O (40.07/0/2) Fix. (4. Ox.) 4 17
14. I hereby o	certify that the information supplied w	vith this filing does not qualify	TOI the exe	omp	tion stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information

another armore report is the and accurate and that my signature shall have the same leaf a fact as it made on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in