FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT FLORIDA DEPARTMENT OF STATE May 11 1998 8:00am **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P97000033817 (2) DOCUMENT #

1. Corporation Name MCCABE'S ELECTRIC, INC. Principal Place of Business Mailing Address 11085 VILLAGE GREEN AVE. 11095 VILLAGE GREEN AVE. SEMINOLE FL 33772 SEMINOLE FL 33772 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/14/1997 2a. Mailing Address 2. Principal Place of Business Applied For 9823 Seminole Blud 9823 SEMINDLE BIVD. 59-3444*a* Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be DEMinale Added to Fees Trust Fund Contribution Country 8. This corporation owes or has caid the current year Intangible Personal Property Tax due June 30. Yes 25 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCCABE, MICHAEL J 11095 VILLAGE GREEN AVE. Street Address (P.O. Box Number is Not Acceptable) SEMINOLE FL 33772 83 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 an familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typical or printed name of tegratered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE PRESident TITLE 1.1 THLE michael J. mccabe NAME 1.2 NAME 9523 seminale Blud STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY - ST- ZIP CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3 2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 4.1 1(TLE TITLE 4 2 NAME STREET ADDRESS 43 STREET ADDRESS

14. I hereby certify that the information supplied with this tring 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 supplimental annual report or supplimental annual report of supplimental annual report of supplimental annual report of the corporation of the documental annual report of the corporation of the corporation of the documental annual report of the corporation of

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NAME

TITLE NAME

1-14-963 (813) 399-252-

Change

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