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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000034036 (8)

JENED ELECTRICAL CONTRACTING INC.

FILED Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
4281 W MC	NAB RD #25	4281 W MCNAB RD #25				
POMPANO BEACH FL 33069		POMPANO E	POMPANO BEACH FL 33069			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						04/10/1997
2. Principal Pl	ace of Business	2a. Mailing Add	iress			4, FEI Number Applied For
21		26				11-2970508 Not Applicable
Suite Apt	#, etc	Suite, Apt.	#, etc.			SR 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State	9	City & State	3			Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		ountry	,	8. This corporation owes or has paid the current/ear Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
	TARKE, EDWARD			81	Name	•
4281 W MONAB RD #25				82	Street	Address (P.O. Box Number is Not Acceptable)
1	OMPANO BEACH FL 33069			L		
				83		
				84	City	85 Zip Code
				٦	City	FL 20 0000
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Flo	rida Statutes, the	abov	e-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						
Cicionic	Signature, typed or printed name of registered ag		(NOTE: Regist	ered Age	ent signature	re required when reinstating) DATE
12.		ND DIRECTORS	1:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PV	L.	DELETE 1.5	TITLE		☐ Change ☐ Addition
NAME	ALGER, JEANETTE		1.2	2 NAME		
STREET ADDRESS	4281 W MCNAB RD #25		1.3	STREET	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 330			CITY-S	T-ZIP	
TITLE	ST		DELETE . 2.1	TITLE		☐ Change ☐ Addition
NAME	starke, Edward		2.2	NAME		' '
STREET ADDRESS	4281 W MCNAB RD #25		23	STREET	ADDRESS	
CITY-SY-ZIP	POMPANO BEACH FL 330			4 CITY-	ST-ZIP	
TITLE			DELETE 3.1	TITLE		Change Addition
NAME			32	2 NAME		
STREET ADDRESS			3.3	STREET	ADDRESS	
CITY-ST-ZIP				I. CITY-	ST-ZIP	
TITLE			DELETE 4.1	TITLE		Change Addition
NAME			4.	2 NAME		
STREET ADDRESS			4.3	STAEET	ADDRESS	
CITY-ST-ZIP				CITY-S	T-21P	
TITLE			DELETE 5.1	TITLE		☐ Change ☐ Addition
NAME			5.2	NAME		
STREET ADDRESS			5.3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	T-ZIP	
TITLE			DELETE 6.1	TITLE		☐ Change ☐ Addition
NAME			6.2	NAME		
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S		
	artifu that the information complete	with this bling doos no		vomo	tion state	and in Section 110 07/2VI). Florido Statutas, Liuther portifu that the information

Interest certify that the information supplied with this filling 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 suppliemental 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: