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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000035574

1. Corporation Name

DRS FLECTRIC, INC.

FILED
Mar 14, 1999 8:00 am
Secretary of State
03-14-1999 90020 036 ***150 00

Principal Place of Business Mailing Address						i 1881/884 tid (814 jann 9814 enth 8814 sein 9819 tres nion sitti tabit sist ta
2562 SW 14TH		6278 N FEDERAL H	IGHWAY			
POMPANO BEACH FL 33062		403				DO NOT WRITE IN THIS SPACE
[FT LAUDERDALE FU US	33308			3. Date Incorporated or Qualifed
		US				04/14/1997
2 Principal DI	ace of Business	2a. Mailing Addres	s			4. FEI Number Applied For
21	ace of Duamess	26				65-0042545 Not Applicab
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27	27			. T es rioquisa
City & State	9	City & State				6Election.Campaign Financing\$5.00-May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	_	Country		8. This corporation owes the current year Intangible Personal Property Tax One of the current year Intangible Personal Property Tax
24	25	29	30			Personal Property Tax. Yes No 10. Name and Address of New Registered Agent
<u> </u>	9. Name and Address of Curre	ant Registered Agent		81	Name	(U. Name and Address of New Adgress Of Service
BION	II, DOMINIC					
	SW 14TH ST.			82	Street Add	ddress (P.O. Box Number is Not Acceptable)
	PANO BEACH FL 33062			83		
)	, , , , , , , , , , , , , , , , , , , ,					· · · · · · · · · · · · · · · · · · ·
	-			84	City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	502 and 607,1508, Florida	Statutes, th	ne above	e-named cor	reporation cultimits this statement for the number of changing its registered
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida, Such Change	a was author	rized DV i	the corporat	ation's board of directors. I hereby accept the appointment as registered
	m ramınar wim, and accept the conj	Jalibris Or, Decilor 901.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3.0.0.00	•	
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable	(NOTE: Regis	stered Agen	t signature requi	uired when reinstating) DATE
12.	OFFICERS A	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DEL	ETE	1.1 TITLE		☐ Change ☐ Addi
NAME	BIONI, DOMINIC			1.2 NAME		
STREET ADDRESS	2562 SW 14TH ST.		l l	1.3 STREET	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33062			1.4 CITY-ST	T-ZIP	Change Addi
TITLE		□ DEL		2.1 TITLE	į	i i i i i i i i i i i i i i i i i i i
NAME				2.2 NAME		
STREET ADDRESS			1	2.3 STREET	ſ	
CITY-ST-ZIP		□ DEI		2.4 CITY-S 3.1 TITLE	IT-ZIP	☐ Change ☐ Addii
TITLE				3.2 NAME		
NAME				3.3 STREET	T ADDRESS	
STREET ADDRESS				3.4. CITY-S		
CITY-ST-ZIP		☐ DEI		4.1 TITLE	11-211-	☐ Change ☐ Addi
NAME		_		4.2 NAME	ļ	
STREET ADDRESS				4.3 STREET	TADDRESS !	
CITY-ST-ZIP				4.4 CITY-ST	i	
TITLE		☐ DE		5.1 TITLE		☐ Change ☐ Addi
NAME				5.2 NAME	ĺ	
STREET ADDRESS			ŀ	5.3 STREET	TADDRESS	
CITY-ST-ZIP		_		5.4 CITY-ST	T-ZIP	
TITLE		☐ DEI	LETE	6.1 TITLE		☐ Change ☐ Addi
NAME			[6.2 NAME	-	
STREET ADDRESS				6.3 STREET	ADDRESS	
CITY-ST-ZIP			-	6.4 CITY-ST	T-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 supplier shall annual report is true and accorde 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 receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed or on an attachment unity an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP .