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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF TATE Sandra E. Mertham

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P9700054841 (6)

FERNANDO'S ELECTRIC SERVICE, INC.

officer or director of the corporation or the road Block 12 or Block 13 if changed, or on ary that

Principal Place of Business Mailing Address

## **FILED** Apr 20 1998 8:00am Secretary of State



1093 A1A BEACH BOULEVARD ST. AUGUSTINE FL 32084 1093 A1A BEACH BOULEVARD ST. AUGUSTINE FL 32084 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/20/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 59-3453522 109 210 21 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 25 St Johns Yes Personal Property Tax due June 30. 32084 Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name González, Fernando 210 5TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) ST. AUGUSTINE FL 32084 83 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 32084 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-7IP is thing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an intrustive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with this hindicated on this annual report or supplemental annual reference of the cornection or the region of the cornection of the co