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Feb 09 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000072930 (5)

1. Corporation Name

WILCO ELECTRICAL CONTRACTING, INC.

Principal Place of Business

16919 S.W. 115 AVE.
MIAMI FL 33157

Mailing Address

16919 S.W. 115 AVE.
MIAMI FL 33157



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/21/1997

4. FEI Number

65-0781082

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 8981 SW 82 ST.

Suite, Apt. #, etc.

22

City & State

23 MIAMI FL

Zip

24 33173

Country

25 USA

2a. Mailing Address

26 8981 SW 82 ST.

Suite, Apt. #, etc.

27

City & State

28 MIAMI FL

Zip

29 33173

Country

30 USA

9. Name and Address of Current Registered Agent

HENDERSON, CATHRYN K
16919 S.W. 115 AVE.
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 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

Cathryn K. Henderson / CATHRYN K. HENDERSON / PRESIDENT

1/9/98

Signature typed or printed name of registered agent (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME HENDERSON, CATHRYN K
STREET ADDRESS 16919 S.W. 115 AVE.
CITY-ST-ZIP MIAMI FL 33157 ☐ DELETE

TITLE D
NAME WILSON, GARRY L
STREET ADDRESS 16919 S.W. 115 AVE.
CITY-ST-ZIP MIAMI FL 33157 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/DIRECTOR ☐ Change ☐ Addition
1.2 NAME CATHRYN K. HENDERSON
1.3 STREET ADDRESS 8981 SW 82 ST
1.4 CITY-ST-ZIP MIAMI FL 33173

2.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
2.2 NAME RALPH DEWHIRST.
2.3 STREET ADDRESS 8981 SW 82 ST.
2.4 CITY-ST-ZIP MIAMI FL 33173

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 supplemental 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: Cathryn K. Henderson / CATHRYN K. HENDERSON / PRESIDENT 1/9/98

CP2E034 (10/97)