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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000073873 (6)

RES ELECTRICAL SERVICES, INC.

FILED Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
330 SE 20TH AVE APT. 517 DEERFIELD BEACH FL 33441-5181				330 SE 20TH AVE APT. 517 DEERFIELD BEACH FL 33441-5181				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified
								08/26/1997
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21				Suite, Apt. #, etc.				65-0116384 Not Applicable
Suite, Apt. #, etc.			27	27				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State			City & State					6. Election Campalgn Financing \$5.00 May Be
23				28				Trust Fund Contribution Added to Fees
Zip	Country			Zip Cour 29 30				8. This corporation owes or has paid the current year Intangible
24	25 g. Name and Address of Current			1-41				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
			i negiste	ien waenr		31	Name	10. Name and Address of New Registered Agent
	MAINE, JOHN				L'	OI 1483146		
330 SE 20TH AVE., APT. 517						2	Street Ad	ddress (P.O. Box Number is Not Acceptable)
DE	EKHIELD BEAU	H FL 33441-5181			-	13		
					'	"		
					ε	4	City	FL 85 Zip Code
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.								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registried agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
12. OFFICERS AND DIRECT				· · · · · · · · · · · · · · · · · · ·		- Wor	il egiatore rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			☐ DELETE	1.1 TITL	E		Change Addition
NAME	ROMAINE, J	IOHN S II			1.2 NAM	ΙĒ	1	
STREET ADDRESS 330 SE 20TH AVE., APT. 517							address	
CITY-ST-ZIP DEERFIELD BEACH FL 33441-5181					1.4 CITY-ST-ZIP			
TITLE			<u> </u>	DELETE	2.1 TITL			Change Addition
NAME				2.2 N		IE.		
STREET ADDRESS	DRESS				2.3 STR	ET /	ADDRESS	'
CITY-ST-ZIP					2.4 CIT			
TITLE				DELETE 3.11				Change Addition
NAME				3.2 N		ΙE		
STREET ADDRESS				3.3 STR			ADDRESS	
CITY-ST-ZIP					3.4. CITY-ST-ZIP			
TITLE				☐ DELETE 4.1				Change Addition
NAME				4.2 N		AE.		·
STREET ADDRESS					4.3 STREE		ADDRESS	
CITY-ST-ZIP					4.4 CITY - ST - ZIP		r- ZIP	
TITLE				☐ DELETE				☐ Change ☐ Addition
NAME					5.2 NAM	E		
STREET ADDRESS					5.3 STRI	ET A	ADDRESS	
CITY-ST-ZIP					5.4 CITY			
TITLE		*		DELETE	6.1 TITL			Change Addition
NAME					6.2 NAM	E		
STREET ADDRESS							ADORESS	
CITY-ST-ZIP					6.4 CITY-ST-ZIP			4

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 supplimental 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: