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

**PROFIT** CORPORATION <sup>4</sup>ANNUAL REPORT

**SUITE 302** 

N MIAMI BEACH FL 33162



FLORIDA DEPARTMENT OF STATE Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000090552 (5)

JUNNI	ELECTRIC ELECTRIC	AL CONTRACTOR	S VIII, IINO				
Principal Place of Business 20855 NE 16TH AVE #6C N MIAMI BEACH FL		Mailing Address 20855 NE 16TH AVE #6C N MIAMI BEACH FL		T (4 DELABO TITA 1031) TRADE BREIT BRITT BREIT BREIT BREIT BRITT BRITT BRITT BRITT BRITT BRITT BRITT BRITT BRITT			
				DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified			
				10/21/1997			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For			
21		26		65 - 0223749 Not Applica			
Suite, Apt. #,	, etc	Suite, Apt. 1	V, etc.	Certificate of Status Desired			
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Zip <b>29</b>	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	AGE, CARIG D NE 167TH ST	-	81 Nai 82 Stro	ne pet Address (P.O. Box Number is Not Acceptable)			

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

63

84 City

•	an familiar with, and accept the obligations of, o					
SIGNATURE	Signature, typed or printed name of registered agent and tilln if an	oplicable (NOTE	: Registered Agent signatura requi	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	IS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change	Addition
NAME	SHIRES, JOHN D III		1.2 NAME			
STREET ADDRESS	20855 NE 16TH AVE #6C		1.3 STREET ADDRESS			
CITY-ST-ZIP	N MIAMI BEACH FL		1.4 CITY-ST-ZIP			
TITLE	SD	DELETE	2.1 TITLE		Change	Additio
NAME	SHIRES, JOSEPH F		2.2 NAME			
STREET ADDRESS	20855 NE 16TH AVE #6C		2.3 STREET ADDRESS			
CITY - ST - ZIP	N MIAMI BEACH FL		2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change	☐ Additio
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE	***************************************	Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADORESS			
CITY - ST - ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Additio
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP			
TITLE		■ DELETE	6.1 TITLE		Change	Additio
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. Thereby 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:** 

7-31-98

Applied For Not Applicable

Zip Code

85

**FILED** 

Apr 21 1998 8:00am

Secretary of State