PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90130 047 ***158.75

DOCUMENT # P98000041741 1. Corporation harms BLACKFOOT ELECTRIC CORPORATION Principal Place of Business 122 47 AVE NE ST PETERSBURG FL 33703 DO NOT WRITE IN THIS SPAN 3. Data incorporated or Qualified (S)00/1938 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 3. Data incorporated or Qualified (S)00/1938 3. Data incorporated or Qualified (S)00/1938 3. Data incorporated or Qualified (S)00/1938 5. Fill Number 5. Certificate Status Desired 5. Certificate Status Desir
Principal Place of Business I325 47 AVE NE ST PETERSBURG FL 20703 ST PETERSBURG FL 20703 DO NOT WRITE IN THIS SPAN 3, Date Incorporated or Qualified \$5,061 1998 2, Principal Place of Business 22, Mailing Address 23, Mailing Address 24, FEI Number 251 Sulfa, Apt. #, etc. Sulfa, Apt. #, etc. Sulfa, Apt. #, etc. 27 City & State City & State City & State 28 Sulfa, Apt. #, etc. 29 20 City & State City & State Sulfa, Apt. #, etc. 29 20 Country 20 Country 21 Country 22 Country 23 25 Country 25 Country 27 Country 28 Sulfa, Apt. #, etc. 30 Country 29 Country 30 Country 30 Country 30 Country 40 Sulfa, Apt. #, etc. 30 Country 30 Country 40 Sulfa, Apt. #, etc. 31 Country 40 Sulfa, Apt. #, etc. 31 Country 40 Country 40
Principal Place of Business 122 47 AVE NE ST PETERSBURG FL 20700 2. Principal Place of Business 2. Amailing Address 2. Principal Place of Business 2. Amailing Address 2. Principal Place of Business 2. Amailing Address 3. Date incorporated or Qualifed 5. Colon (5)(06)(1998) 4. FEI Number 5. Colon (5)(06)(1998) 5. Country (2) (1) & State 2. City & State 2. City & State 2. City & State 2. City & State 2. December (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
Principal Place of Business 122 47 AVE NE ST PETERSBURG FL 20700 2. Principal Place of Business 2. Amailing Address 2. Principal Place of Business 2. Amailing Address 2. Principal Place of Business 2. Amailing Address 3. Date incorporated or Qualifed 5. Colon (5)(06)(1998) 4. FEI Number 5. Colon (5)(06)(1998) 5. Country (2) (1) & State 2. City & State 2. City & State 2. City & State 2. City & State 2. December (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
1325 67 AVE NE ST PETERSBURG FL 33703 2. Principal Place of Business 2. Amiling Address 2. Amiling Address 2. Suite, Apt. 8, etc. 2. Suite, Apt. 8, etc. 2. City & State 2. City & State 2. City & State 2. Do Northwrite in this space 2. City & State 2. City & State 2. City & State 2. City & State 2. Do Northwrite in This space 2. Suite, Apt. 8, etc. 3. Suite, Apt. 8
ST PETERSBURG FL 30703 ST PETERSBURG FL 30703 ST PETERSBURG FL 30703 DO NOT WRITE IN THIS SPAN 3. Date incorporated or Qualifed (\$5(06) (1998) 2. Principal Place of Business 22. Mailing Address 25
3. Date Incorporated or Qualifed Q5/06/1938 2. Principal Place of Business
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. FEI Number 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. City & State 3. City & State 3. City & State 3. City & State 3. Country 3. December 3. Country 3. December 3. Country 3. Name and Address of Current Registered Agent 3. Name and Address of Current Registered Agent 4. This corporation owes the current year Intendity 3. Name and Address of Current Registered Agent 4. This corporation owes the current year Intendity 3. Name 4. This corporation owes the current Park Them 1. Name and Address of Pew Registered Agent 5. City Jennifer W 5. Stripet Address (P.D. Box Number is Not Acceptable) 5. Stripet Address (P.D. Box Num
2. Principal Place of Business 21 28 326 326 326 326 326 326 326 326 326 326
Suite, Apt. #, etc. Suite, Ap
Suite, Apt. #, etc. 23
City & State 27 City & State 28 City & State 6. Election Campaign Financing 3 29 29 20 Trusi Fund Contribution 7 21 Country 21 Country 8. This corporation owes the current year intangib 7 7 7 7 7 7 7 7 7
City & State City & State City & C
Zip Country Zip Country Zip Country 8. This corporation owes the current year intengible 24 25 29 30
24 25 25 29 30 Personal Property Tax.
9. Name and Address of Current Registered Agent SCOTT, JENNIFER W 1325 47 AVE NE ST PETERSBURG FL 33703 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 change 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature. Signature, hyerd or printed name of rigistered agent and the first purpose of change agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature. Signature with, speed or printed name of rigistered agent and the first purpose of the corporation's board of directors. I hereby accept the appointment agent is a first purpose of change agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS 14. CITY ST-2P TITLE DELETE 1. ITIME 1. CITY ST-2P DELETE 2. ITIME 1. CITY ST-2P DELETE 2. ITIME 2. NAME 3. STREET ADDRESS CITY-ST-2P DELETE 3. STREET ADDRESS CITY-ST-2P TITLE 1. DELETE 3. STREET ADDRESS CITY-ST-2P TITLE 1. DELETE 3. STREET ADDRESS CITY-ST-2P TITLE 1. ALL ST-2P 1. ALL
SCOTT, JENNIFER W 1325 47 AVE NE ST PETERSBURG FL 33703 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 changoffice 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 of the purpose of changoffice or registered agent, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS 13. STREET ADDRESS 13. STREET ADDRESS 13. Peters by J.
1325 47 AVE NE ST PETERSBURG FL 33703 82 City FL 83 14 City FL 85 15 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change of the fiftee 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITION
ST PETERSBURG FL 33703 83 84 City FL 85 85 City FL 85 86 City FL 85 86 City FL 85 86 City FL 85 86 City FL 85 87 City FL 85 88 City FL 85 FL 8
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 change from the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature. Spread or printed name of registered agent and tree? speciated (note: Registered Agent attractive) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZP TITLE DELETE 1.1 TITLE DELETE 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-ZP TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE DELETE 3.3 TITLE DELETE 3.1 TITLE DELETE 3.3 TITLE DELETE 3.4 CITY-ST-ZP TITLE DELETE 3.4 CITY-ST-ZP TITLE DELETE 3.5 WARE 4.7 WARE
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 change depend 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 agent. I am familiar with, and accept the obligations of, Section 807.0505, Florida Statutes. SIGNATURE Signature, hyped or printed name of ingistered agent and state if explanate (NOTE: Registered Agent signature required when rematating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS OFFICERS AND DIRECTORS 14. CITY-ST-ZP TITLE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP TITLE DELETE 2.1 TITLE 1.4 CITY-ST-ZP TITLE 1.5 TIREET ADDRESS CITY-ST-ZP TITLE 1.5 TIREET ADDRESS 2.4 CITY-ST-ZP TITLE 1.5 TIREET ADDRESS 2.5 STREET ADDRESS 2.6 CITY-ST-ZP TITLE 1.5 STREET ADDRESS 2.7 ST-ZP TITLE 1.5 TIREET ADDRESS 3.5 STREET ADDRESS 4.5
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 change of 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 agent. I am familiar with, and accept the obligations of, Section 507.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE DELETE DELETE 1.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE DELETE 1.4 CITY-ST-ZP TITLE DELETE 1.5
Agent. 1 am familiar with, and accept the obligations of, Security 607.0000, Folial Stations. Signature. Specific or printed name of registered agent and the 11 applicable (NOTE: Registered Agent byrealure required when reinclusing) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. TITLE NAME 12.NAME 12.NAME 12.NAME 13. TITLE 12.NAME 12.NAME 13. TITLE 14. CITY-ST-ZP TITLE NAME 13. TITLE 14. CITY-ST-ZP 14. CITY-ST-ZP TITLE 12. TITLE 13. TITLE 14. CITY-ST-ZP 14. CITY-ST-ZP TITLE 13. TITLE 14. CITY-ST-ZP 14. CITY-ST-ZP TITLE 13. TITLE 14. CITY-ST-ZP TITLE 13. TITLE 14. CITY-ST-ZP TITLE 14. CITY-ST-ZP TITLE 15. TITLE 16. CITY-ST-ZP TITLE 16. CITY-ST-ZP TITLE 17. CITY-ST-ZP TITLE 18. CITY-ST-ZP TITLE 19. CITY-ST-ZP TITLE 19. CITY-ST-ZP TITLE 10. CITY-ST-ZP TITLE 1
Agent. 1 am familiar with, and accept the obligations of, Security 607.0000, Folial Stations. Signature. Specific or printed name of registered agent and the 11 applicable (NOTE: Registered Agent byrealure required when reinclusing) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. TITLE NAME 12.NAME 12.NAME 12.NAME 13. TITLE 12.NAME 12.NAME 13. TITLE 14. CITY-ST-ZP TITLE NAME 13. TITLE 14. CITY-ST-ZP 14. CITY-ST-ZP TITLE 12. TITLE 13. TITLE 14. CITY-ST-ZP 14. CITY-ST-ZP TITLE 13. TITLE 14. CITY-ST-ZP 14. CITY-ST-ZP TITLE 13. TITLE 14. CITY-ST-ZP TITLE 13. TITLE 14. CITY-ST-ZP TITLE 14. CITY-ST-ZP TITLE 15. TITLE 16. CITY-ST-ZP TITLE 16. CITY-ST-ZP TITLE 17. CITY-ST-ZP TITLE 18. CITY-ST-ZP TITLE 19. CITY-ST-ZP TITLE 19. CITY-ST-ZP TITLE 10. CITY-ST-ZP TITLE 1
Signature, typed or printed name of ingistated agent and title if explicated (NOTE: Replaced Agent signature regulated when remaining) 12. OFFICERS AND DIRECTORS ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE DELETE 1.1 TITLE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP TITLE DELETE 3.1 TITLE 3.2 NAME STREET ADDRESS CITY-ST-ZP TITLE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 2.4 CITY-ST-ZP TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZP TITLE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZP TITLE 1.1 TITLE 1
TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP STREET ADDRESS CITY-ST-ZP TITLE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZP TITLE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 4.3 STREET ADDRESS CITY-ST-ZP TITLE 1.4 CITY-ST-ZP
INTEREST ADDRESS CITY-ST-ZP TILE NAME STREET ADDRESS CITY-ST-ZP TILE NAME STREET ADDRESS CITY-ST-ZP TILE DELETE DELETE 12 NAME 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZP TILE NAME 4.2 NAME 4.2 NAME STREET ADDRESS CITY-ST-ZP TILE NAME STREET ADDRESS CITY-ST-ZP TILE NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZP TILE NAME STREET ADDRESS CITY-ST-ZP
CITY-ST-ZP TITLE DELETE 21 TITLE NAME STREET ADDRESS CITY-ST-ZP
CITY-ST-ZP TITLE DELETE 21 TITLE NAME STREET ADDRESS CITY-ST-ZP
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TO DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.2 NAME 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE 1.3 STREET ADDRESS CITY-ST-ZIP TITLE 1.4 TITLE 1.5
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME STREET ADDRESS GTY-ST-ZIP A4. CITY-ST-ZIP TITLE A4. STREET ADDRESS CITY-ST-ZIP A4. CITY-ST-ZIP TITLE A4. STREET ADDRESS CITY-ST-ZIP A4. CITY-ST-ZIP
CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 4.1 TITLE L.2 NAME STREET ADDRESS CITY-ST-ZIP A4 CITY-ST-ZIP L.3 STREET ADDRESS A4 CITY-ST-ZIP L.3 STREET ADDRESS CITY-ST-ZIP L.3 STREET ADDRESS A4 CITY-ST-ZIP
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TO STREET ADDRESS A4 CITY-ST-ZIP
CITY-ST-ZIP 3.A. CITY-ST-ZIP TITLE 1.2 DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 5TREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS GITY-ST-ZIP 4.3 STREET ADDRESS 4.4 GTY-ST-ZIP
CITY-ST-ZIP 44 CITY-ST-ZIP
TITLE L. DELETE \$5.1 TITLE
NAME
STREET ADDRESS 5,3 STREET ADDRESS
CITY-51-ZIP 54 CITY-51-ZIP
TITLE DELETE GITTLE
NAME 62 NAME 63 STREET ADDRESS

CITY-ST-ZP

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 tree and accurate and that my signature shall have the same legal affect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee ampowered 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, with all other like empowered.

SIGNATURE

NATURE AND TYPED BY PRINTED NAME OF STORMS OF FICER OR GREGICAL

20/49