

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90074 012 ***158.75

DOCUMENT #

P98000054084

1. Entity Name

PRO-ARK ELECTRIC, INC..

Principal Place of Business

Mailing Address

811 N.W. First Street

811 N.W. First Street

Ft. Lauderdale, FL 33311

Ft. Lauderdale, FL 33311

2. Principal Place of Business

3. Mailing Address

18500 NE 5th Ave.

18500 NE 5th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

North Miami, FL

North Miami, FL

65-0844101

Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

33179 USA

33179 USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Daniel E. Oates

1500 E. Atlantic Blvd., Suite B
Pompano Beach, FL 33060

Name

Russell D. Kaplan, Esq.

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

750 SE 3rd Avenue

Suite 100

City

Ft. Lauderdale

FL

Zip Code

33316

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Russell Kaplan, Attorney

2/2/01

Signature, typed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
NAME President
STREET ADDRESS Forest Virgil Simpson
CITY-ST-ZIP 811 NW First Street
Ft. Lauderdale, FL 33311

TITLE ☐ Change ☒ Addition
NAME President
STREET ADDRESS Ed Gondola a/k/a John E. Gondola,
CITY-ST-ZIP 18500 NE 5th Avenue
North Miami, FL 33179

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ed Gondola

2/ /01

Date

305-770-3822

Daytime Phone #

a/k/a John E. Gondola, Jr.

CR2E0349R 1/00)