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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

1999

DOCUMENT # P98000101098

HENRY PAUL ELECTRIC, INC.

25

Principal Place of Business

2. Principal Place of Business

ALFIERE, RON

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

3109 GRAND AVENUE #490 COCONUT GROVE FL 33133 3109 GRAND AVENUE #490 COCONUT GROVE FL 33133

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

9. Name and Address of Current Registered Agent

Zip

## FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90046 040 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable

□No

3. Date Incorporated or Qualifed

65-0879:110

5.- Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

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

12/04/1998

3001 N.E. 47TH STREET FT. LAUDERDALE FL 33300			CHOOL	Street Address (F.O. Dox Number is Not Acceptable)				
		84	City	FL	85	Zip Code		
office or re	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida. Such change was author m familiar with, and accept the obligations of, Section 607.0505, Florida	ized by	the corp	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appoin	hangin tment a	g its registered is registered		
SIGNATURE	Signature, typed or ponted name of registered agent and title if applicable. (NOTE: Regis	tered Ager	nt signature a	equired when reinstating) DATE				
12.		13.		ADDITIONS/CHANGES TO OFFICERS AN	DIRE	CTORS IN 12		
mile I				D	☐ Cha	nge Addition		
NAME.		1.2 NAME		HELEN ITHIER 3109 GRAND AVE # 490 COCONUT GROVE, FL 3313				
STREET ADDRESS		1.3 STREE	TADDRESS	3109 GRANDA				
CITY-ST-ZIP		.4 CITY-S	T-ZIP	COCONUT GROVE, FL 3313	<u> </u>			
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STREET ADDRESS		3.3 STREE	TADDRESS					
CITY-ST-ZIP		3.4 CITY-S	T-ZIP					

Country

Name

30

4. I needly certify that the information supplied with this litting does not qualify for the exemptor scaled 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, with all other like empowered.

GNATURE: \*\*\* SEGNATURE REQUIRE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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4/26/99

305-856-9998 Daytime Phone # ZE034 (11/98)