## 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 #

ADR ELECTRIC, INC.

**FILED** Apr 01 1998 8:00am Secretary of State

|--|--|--|

Principal Place	e of Business	Mailing Address			TIBLE BEOM BEOM BIRE BERE
181 SOUTH R		181 SOUTH RIVER ROAD			
STUART FL 3 US	4990	STUART FL 34996 US		DO NOT WRITE IN TH	IIS SPACE
		•••		3. Date Incorporated or Qualified	]
				03/22/1991	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# Ato	26 Cuito Apt # ata		65-0281086	Not Applicable
22	, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29 3	0	Personal Property Tax due June 30.	🔀 Yes 🗌 No
21-	9. Name and Address of Curren	t Registered Agent	04 11 0	10. Name and Address of New Register	ed Agent
	MAN, STUART H		81 Name	ltman Stuart	<b>H</b> .
	NW FIRST AVE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	- I mth.
	TH FLOOR		63	ernational Plac	e 17 Floor
MIAMI FL 33128		100	S.F. 2nd Stre	et l	
			84 City Ah		L 85 Zip Code
11 Pursuant t	o the provisions of Sections 607.050	2 and 607 1508. Florida Statutae	the showensmed corn	poration submits this statement for the purpos	
Office or re	agistered agent, or both, in the State.	of Florida, Such change was aut	thorized by the corporat	ion's board of directors. I hereby accept the	appointment as registered
_	m familiar with, and accept the obliga	mons of, Section 607.0505, Florid	da Statutes.		
SIGNATURE	Signature, typud or printed name of registered ages	of and title if applicable (NOTE I	Registered Agent signature require	ed when reinstating) DAT	F
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	☐ DELETE	11 TITLE		Change Addition
NAME	RANDALL, ALAN D.		1.2 NAME		
STREET ADDRESS	181 SOUTH RIVER ROAD		1.3 STREET ADDRESS		
CITY - ST - ZIP	STUART FL		1.4 CITY-ST-ZIP		
TITLE	SD DANDALL DATBICIA O	☐ DELETE	2.1 TITLE		Change Addition
NAME	RANDALL, PATRICIA Q. 181 SOUTH RIVER ROAD		2.2 NAME		
STREET ADDRESS	STUART FL		2 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	OTOMIT IL	DELETE	2.4 City-ST-ZiP		Change   Addition
NAME		C DELETE	31 TITLE 3.2 NAME	·	☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME 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 ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
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 arrival 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.

1/9/98

561-223-9256