FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # \$47649

(6)

P & J ELE	ECTRICAL CONTRACT	Mailing Address	<u></u>			
160 S.W. 12TH AVE. 101B Deerfield Beach Fl 33442 US		160 S.W. 12TH AVE. Suite 101B Deerfield Beach Fl 33442 US		3. Date Incorporated or Qualified 04/24/1991	3a. Date of Last Report 03/22/1995	
2. Principal Place	of Business	2a. Mailing Address	····	_,	4. FEI Number	Applied For
11		26	<u> </u>		65-0256086	Not Applicable \$8.75 Additional
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
3		28	T		Trust Fund Contribution This corporation has liability for	Added to rees
Zip TI	Country	Zip 29	30 Cour	ntry		DNo
4	25 3. Name and Address of Cur				10. Name and Address of New F	legistered Agent
	5. Italio dila Addition di Cal	/		81 Name		
WERKSMA	NI ALAM I		-	82 Street Add	lress (P.O. Box Number is Not Acceptat	ole)
160 SW 12			İ	B2 00007133	, oo t	
SUITE 101B			Ī	83		
DEERFIELD BEACH FL 33442			ŀ	84 City		85 Zip Code
			i		oration submits this statement for the pu	FL T
12.		AND DIRECTORS	13.	Apoct squature requir	ADDITIONS/CHANGES TO OFF	1CERS AND DIRECTORS IN 12 ☐ Change ☐ Addition
TITLE	DP	☐ DELETE	1. 1 TI			Change - Noutron
NAMÉ	ZAWADZKI, PHILLIP		1.2 M			
STREET ADDRESS	1698 S.W. 7TH CT.		l	TY-ST-ZIP		
CITY - ST - ZIP	BOCA RATON FL S	DELETE	2.17			Change Addition
TITLE NAME	DORAN, PATRICK		2 2 N	AME		
STREET ADDRESS	2280 NEPTUNE RD		2 3 S	TREET ADDRESS		
CITY-SI-ZIP	BOCA RATON FL		24 C	TV - S1 - ZIP		Change Addition
TITLE	DELETE		3 1 1			Change Addition
NAME			32N			
STREET ADDRESS				STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	4.11			☐ Change ☐ Addition
NAME		_	4.2 N	IAME		
STREET ADDRESS			435	TREET ADDRESS		
CITY-ST-ZIP				OTY - ST - ZIP		Change Addition
TIFLE		☐ DELÉTÉ	5 1			Change
NAME			•	IAME		
STREET ADDRESS				STREET ADDRESS		
CITY - ST - ZIP		∏ D€LETE		TITLE		Change Addition
TITLE NAME		<u></u>	1	NAME		
MANAGE			639	STREET ADDRESS		
STREET ADDRESS			640	DITY-ST-ZIP		
STHEFT ADDRESS CITY+SI-ZIP						
CITY - ST - ZIP	certify that the information supp	plied with this filing is voluntarily fu	rnished and	does not qualified true and according	ly for the exemption stated in Section 11 urate and that my signature shall have th	9,07(3)(k), Florida Statutes. I furtner ne same legal effect as if made unde
CITY - ST - ZIP	certify that the information supp the information indicated on this am an officer or director of the	plied with this filing is voluntarily fu s and ual report or supplemental ar coporation by the receiver or trus	rnished and mual report tee empow	does not qualif is true and acci ered to execute	ty for the exemption stated in Section 11 urate and that my signature shall have the this report as required by Chapter 607,	9,07(3)(k), Florida Statutes, Hurtner ne same legal effect as if made unde Florida Statutes; and that my name
CITY - ST - ZIP	certify that the information supplies information indicated on this am an officer or director of the Block 12 or Block 13 if charges	plied with this filing is voluntarily to see Jual report or supplemental ar corporation or the redeiver or trus at or or supplement with an ad person relinted NAME OF SIGNING OFF	tee empow dgess./	ered to execute	this report as required by Chapter 607,	9,07(3)(k), Florida Statutes. I Turther he same legal effect as if made undo Florida Statutes; and that my name

CR2E034 (12/95)