FILED

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90072 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$62407

1. Corporation Name

BROWNING ELECTRIC, INC.

Principal Place of Business Mailing Address 5073 SW 28TH AVE 5073 SW 28TH AVE FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/21/1991 4 FFI Number Applied For 2. Principal Place of Business 2a. Mailing Address NOT APPLICABLE Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution 23 Country Zip Country 7ip This corporation owes the current year Intangible ☐ Yes Personal Property Tax. 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BROWNING, LABAN Street Address (P.O. Box Number is Not Acceptable) 5073 SW 28TH AVE FT LAUDERDALE FL 33312 83 84 85 Zip Code 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 changing its registered 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 as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition ☐ DELETE TITLE PD 11 TTR 6 NAME **BROWNING, LABAN** 1.2 NAME 5073 SW 28TH AVE 1.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33312 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE ☐ Change TITLE 2.1 TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 3.1 TITLE TITLE NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE TITLE 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 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.

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING GERICER OR DIRECTOR

LOBAN BROWNING TECSIONS

LOBAN BROWNING

☐ DELETE

15-199 2702670

Daytime Phone #

Change

Addition

CR2E034 (11/98)