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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S77709

SOUTH FLORIDA ELECTRIC ENTERPRISES, INC.

		•	•	٠					
Principal Place	e of Business	Mailing Address				- I IOOFIOIA PAI IOOFII TOOFII OOFIIO I	1 0 11 81011 011	.	J is ii Bisi) (63)
4701 SW 45 ST 4701 SW 45 ST		4701 SW 45 ST					•		
FT. LAUDERDALE FL 33314 FT. LAUDERDALE FL 33314						DO NOT WEITE	'N TUIC (22405	
	•					DO NOT WRITE 3. Date Incorporated or Qualifed	IN THIS S	SPACE	
						08/30/1991			+
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		☐ Ac	plied For
21	ade of Edomesia	26				65-0295914		_ 	t Applicable
	Suite, Apt. #, etc Suite, Apt. #, etc.					·		\$8.75	
22	27					5. Certifcate of Status Desired		Fee Re	quired
City & State	City & State City & State					6. Election Campaign Financing	<u> </u>	\$5.00	May Be
23	28					Trust Fund Contribution	<u> </u>	Added t	to Fees
Zip	Country Zip Cou			′		8. This corporation owes the current	•		_
24	25 29 30					Personal Property Tax.		□Yes	□No
•	9. Name and Address of Current	Registered Agent	81	Nar	~ ~	10. Name and Address of New Reg	isterea A	gent	
SOBLEWSKI, DAN			. [INGI	ne 				
	NE 23RD PLACE	,	82	Stre	et Addre	ss (P.O. Box Number is Not Acceptable)		
POMPANO BEACH FL-33062			83			****			
	THE BENOTH E COULT						* = -	· <u>~</u> ·	<u>-:</u> -
Ĭ	• .		84	City	′		FL	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 registe								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.									gistered
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F 12. OFFICERS AND DIRECTORS			egistered Agent signature required v			when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PT OFFICERS AND	DELETE	1.1 TITLE			ADDITIONO/OHAROLO TO CITTLE		☐ Change	Addition
NAME	WHITEHEAD, RUSSELL		1.2 NAME						_
STREET ADDRESS	6481 HARDING ST		1.3 STREE	T ADDRE	-ss				
CITY-ST-ZIP	HOLLYWOOD FL 33024			1.4 CITY-ST-ZIP					
TITLE	VS	2.1 TITLE			· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition	
NAME	VS DELETE SOBOLEWSKI, DANIEL								
STREET ADDRESS	2751 NE 23RD PL		2.3 STREE	TADDRE	SS				
CITY-ST-ZIP	POMPANO BEACH FL 33062		2. 4 CITY-5	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE			1 N 1 N 1 N 1 N 1 N 1 N 1 N 1 N 1 N 1 N		Change	Addition
NAME			3.2 NAMÉ			•			
STREET ADDRESS			3.3 STREE	TADORE	ss				
-CITY-ST-ZIP			3.4. CITY- S	ST-ZIP					
TITLE	☐ DELETE		4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	T ADDRE	ESS				}
CITY-ST-ZIP			4.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition
NAME	-		5.2 NAME						
STREET ADDRESS			5.3 STREE	TADDRE	ess				
CITY-ST-ZIP		·	5.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition

14. 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 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 chapter 607 or on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6,4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

REQUIRED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-792-7001