2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S86820

1. Entity Name

A.B. ELECTRICAL OF MIAMI CORP.

FILED
Mar 12, 2001 8:00 am
Secretary of State
03-12-2001 90489 039 ***150.00

Principal Place of Business	Mailing Address
1971 NW 34TH AVE MIAMI FL 33125 US	1971 NW 34TH AVE MIAMI FL 33125 US

00024462

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business *Same as above*	3. Mailing Address *Same as above*	
Suite, Apt. #, etc. *Same as above*	Suite, Apt. #, etc. *Same as above*	
City & State *Same as above*	City & State *Same as above*	4. FEI Number **65-0288288** Applied For / Not Applicable
Zip *Same* Country *USA*	Zip *Same* Country *USA*	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRANCISCO, HUMBERTO
1971 NW 34TH AVE
MIAMI FL 33125

7. Name and Address of New Registered Agent

Name *N/A*

Street Address (P.O. Box Number is Not Acceptable) *N/A*

N/A

City *N/A*   FL   Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE x *Humberto Francesco*

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

DATE *03/09/2001*

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	**FILE NOW!!! FEE IS $150.00** **After MAY 1, 2001 Fee will be $550.00** **Make Check Payable to Department of State**	10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FRANCISCO, HUMBERTO		NAME		
STREET ADDRESS	1971 NW 34TH AVE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FRANCISCO, MILAGROS S		NAME		
STREET ADDRESS	1971 NW 34TH AVE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Humberto Francesco*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/09/2001 Date   *(305)638-3883* Daytime Phone #

CR2E034 (10/00)