FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 8:39

DOCUMENT # V07787 (7)

1. Corporation Name
ELECTRICIANS "R" US, INC.

Principal Place of Business	Mailing Address
17470 N.W. 18TH AVE. OPA LOCKA FL 33054	17470 N.W. 18TH AVE. OPA LOCKA FL 33054

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/21/1992
3a. Date of Last Report: 04/28/1994
4. FEI Number: 65-0317291 — Applied For / Not Applicable

2. Principal Place of Business 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MUSTAFA, MUSHEER
17470 N.W. 18TH AVE.
OPA LOCKA FL 33054

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 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.

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

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MUSTAFA, MUSHEER
STREET ADDRESS	17470 N.W. 18TH AVE.
CITY-ST-ZIP	OPA LOCKA FL
TITLE	DVS
NAME	MUSTAFA, NASHEED
STREET ADDRESS	17470 N.W. 18TH AVE.
CITY-ST-ZIP	OPA LOCKA FL
TITLE	T
NAME	MUSTAFA, NASHEED
STREET ADDRESS	17470 N.W. 18TH AVE.
CITY-ST-ZIP	OPA LOCKA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: DP ☒ Change ☐ Addition
1.2 NAME: Lord Noble Majesty
1.3 STREET ADDRESS: 17470 Northwest 18th Avenue
1.4 CITY-ST-ZIP:

THIS IS A NAME CHANGE ONLY
ALL OTHER INFORMATION
ENCLOSED IS A COPY OF NAME CHANGE
ADDRESS REMAINS SAME FOR OFFICERS

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and do[...] certify that the information indicated on this annual report or supplemental annual report is true and [...] oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by [...] appears in Block 12 or Block 13 if changed, or on an attachment with an address. [...]ation. I further [...] as if made under [...] that my name

SIGNATURE: NASHEED MUSTAFA — Nasheed Mustafa — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 1 FEB 1995 Date — 305 621-4046 Daytime Phone #

011027 CP