FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00



Sandra B. Mortham

COF ANNU	PROFIT RPORATION JAL REPORT 1998	Sandr. Secr	PARTMENT OF STATE a B. Mortham etary of State DE CORPORATIONS	2	98 8:00am y of State
1	MENT # V234; ELECTRIC, INC.	58 (5)			
)
Principal Plac	e of Business	Mailing Address			H BIBIH BIBIH BIBIH BIBIH BIBIH ROBE
JOB SITES P.O. BOX 2272 I.R. COUNTY FL 32967 VERO BEACH FL 32961-2272			061-2272		
US		U\$		DO NOT WRITE IN T 3. Date Incorporated or Qualified	HIS SPACE
				03/23/1992	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-3112366	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$9.75 Additional
Cate 8 Stat		27			Fee Required
City & Stat	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country 30	8. This corporation owes or has paid th	
24	25 9. Name and Address of Cur	29 rrent Registered Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Register	
	IIDROZ, GARETT		81 Nanie		
	81 9 6TH AVE.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
VE.	RO BCH. FL 32967		83		
			84 City		85 Zip Code
11 Pursuant	to the provisions of Sactions 607 (0502 and 607 1508 Florida Sta	abules, the above-pamed corr		┡┖╎╎
office or r	egi ste red agent, or both, in the St m fam iliar with, and accept the ob	tate of Florida Such change was oligations of, Section 607.0505.	as authorized by the corpora Florida Statutes.	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE					
12.	Signature typed or protest oan eroll tog stem: OFFICERS	AND DIRECTORS	NOTE Registered Agent signature requ 13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	DELETE	11 TITLE		☐ Change ☐ Addition 은
NAME PERFET ADDRESS	GUIDROZ, GARRETT 8466 91ST AVE		1.2 NAME		AND DIRECTORS IN 12 Change Addition 750
STREET ADDRESS CITY-ST-ZIP	VERO BEACH FL		1.3 STREET ADDRESS 1.4 CHY-ST-ZIP		32 <u>F</u>
TITLE		DELETE	2.1 TITLE		Change Addition O
NAME STREET ADDRESS			2.2 NAME 2.3 STREFT ADDRESS	e e	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		☐ DEL€ TE	3.1 TITLE		Change Addition
STREET ADORESS			32 NAME 33 STHEET ADDRESS		
CITY-ST-ZIP			34. CHY-SI-7IP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME STREET ADDRESS			4 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	_	•	4.4 CHY-ST-7IP	_	
TALE		DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP	<u></u>		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME STREET ADORESS			6.2 NAME 6.3 STREET ADDRESS		
OTHER UPONESS	!		ora printer unbutas		

6.4 CITY - ST - ZIP 14. Thereby 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 suppliemental annual prior to the 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 comparation or the receiver or flustee 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 to our an attainment with an address

FILED