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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V57131

1. Corporation Name

H & R ELECTRICAL CONTRACTORS INC

Mar 01, 1999 8:00 am					
Secretary of State					
03-01-1999 90142 005 ***158.75					

	LECTRICAL CONTRACTOR			
Principal Place		Mailing Address		}
2655 OLD DIXII	E HWY	2655 OLD DIXIE HWY		}
SUITE A SUITE A KISSIMMEE FL 34744 KISSIMMEE FL 34744			DO NOT WRITE IN THIS SPACE	
US	34744	US		3. Date Incorporated or Qualifed
}				08/10/1992
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-3139962 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22	·	27	· 	5. Certificate of Status Desired Fee Required
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax
24	25	29 30	L	Personal Property Tax. Li Yes Li No 10. Name and Address of New Registered Agent
ļ	9. Name and Address of Curren	t Registered Agent	81 Name Q	
WES	STON, RANDALL D.		Ki Name Ki	ANDALL D. WESTON
	AKEPOINTE CIRCLE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
]	SIMMEE FL 34743		83 22	OI HAWKS RIDGE POINT
14100	phinice i e 94749		63	
			84 City	SS (MMER FL 85 Zip Code 3474)
	to the provinces of Spatiana 507 050	2 and 607 1508 Florida Statutes	he shove named come	oration submits this statement for the ourgose of changing its registered
l office or r	adictored agent or both in the State (of Florida. Such channe was autho	orized by the corporatio	on's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Florida	Statutes.	71.100
SIGNATURE	Signature, typed or printed name of registered agen	A could take of applicable	istered Agent signature required	d when reinstating)
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TILE	☐ Change ☐ Addition
NAME	WESTON, RANDALL D		1.2 NAME	,
STREET ADDRESS	3201 HAWKS RIDGE POINT		1.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34741	i	1.4 CITY-ST-ZIP	
TITLE	ST	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	WESTON, HELEN M	1	2.2 NAME	
STREET ADDRESS	3201 HAWKS RIDGE POINT		2.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34741		2. 4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WESTON, JAMES C		3.2 NAME	
STREET ADORESS	2392 WINDWARD COVE	l l	3.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34746]	34. CITY-ST-ZIP	_
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		Î	4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	,
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE	 	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS	(5.3 STREET ADDRESS	
CITY-ST-ZIP	{		5.4 CITY-ST-ZIP	
TITLE	 	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	I	- · · ·	1	
	!		6.2 NAME	
STREET ADDRESS	}		6.2 NAME 6.3 STREET ADDRESS	

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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE: