

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 FEB 10 AM 11:52**

**DOCUMENT # V70780 (4)**

1. Corporation Name  
**LASH-LECTRIC, INC.**

Principal Place of Business Mailing Address  
**1515 SOUTH FEDERAL HIGHWAY SUITE 300 BOCA RATON FL 33432**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business  
21 **2760 NE 4 WAY** 2a. Mailing Address  
26 **2760 NE 4 Way**  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 **BOCA RATON FL.** 27 **BOCA RATON**  
City & State City & State  
23 **33431** 28 **FL.**  
Zip City & State  
24 **USA** 29 **33431** 30 **USA**  
Country Zip Country

3. Date Incorporated or Qualified **10/14/1992** 3a. Date of Last Report **05/01/1994**  
4. FBI Number **65-0369421** Applied For Not Applicable  
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  
**GILLESPIE, R. BOWEN III  
1515 SOUTH FEDERAL HIGHWAY  
SUITE 300  
BOCA RATON FL 33432**

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, Title or Printed Name of Registered Agent and Title of Position

(NOTE: Registered Agent signature required when specifying)  
DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>LASHLEY, WILLIAM J.</b>
STREET ADDRESS	<b>2760 N E 4 WAY</b>
CITY - ST - ZIP	<b>BOCA RATON FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that I am an officer or director of the corporation or its registered agent, or both, 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 its registered agent, or both, and that my signature shall have the same legal effect as if made under oath; and that I am an officer or director of the corporation or its registered agent, or both, and that my signature shall have the same legal effect as if made under oath.

SIGNATURE: *William J. Lashley*  
Signature and Title or Printed Name of Signing Officer or Director

**2/6/95 407-392-6420**  
Date