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Mar 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 847773 (9)

1. Corporation Name: ELECTRICAL-MECHANICAL CONTRACTORS, INC.



Principal Place of Business: 2541 BALCO ROAD, P.O. BOX 91, BIRMINGHAM AL 35210 US
Mailing Address: POST OFFICE BOX 91, P.O. BOX 91, ALTON AL 35015-0091 US

3. Date Incorporated or Qualified: 12/22/1980
3a. Date of Last Report: 02/01/1996
4. FEI Number: 64-0538954
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 [X] No

2. Principal Place of Business: 21 2541 Balco Road, 22 Suite, Apt #, etc., 23 Birmingham, Alabama, 24 35210, 25 USA
2a. Mailing Address: 26, 27 Suite, Apt #, etc., 28, 29 City & State, 30 Zip, Country

9. Name and Address of Current Registered Agent: CT CORPORATION SYSTEM, 1200 S. PINE ISLAND ROAD, PLANTATION FL 33324

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Table with 12 rows for Officers and Directors. Columns include Title, Name, Street Address, City-St-Zip, and a Delete checkbox.

Table with 13 rows for Additions/Changes to Officers and Directors in 12. Columns include Title, Name, Street Address, City-St-Zip, and Change/Addition checkboxes.

14. I do 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 is stated 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 changed, or on an attachment with an address.

SIGNATURE: _____

PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

2/25/97

Date

(205) 833-6896

Daytime Phone #

CR2E034 (9/96)