

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 16, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P40499

1. Entity Name  
PUBLIC UTILITIES MAINTENANCE, INC.



Principal Place of Business  
106-18 ASTORIA BLVD  
ELMHURST, NY 11369 US

Mailing Address  
106-18 ASTORIA BLVD  
ELMHURST, NY 11369 US



02092007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
11-3097527 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROEKER, DOUGLAS, ESQ.  
66 WEST FLAGLER STREET  
SUITE 1000  
MIAMI, FL 33130

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CDP
NAME	BORTOLIS, EMMANUEL
STREET ADDRESS	106-18 ASTORIA BLVD
CITY-ST-ZIP	E ELMHURST, NY 11369
TITLE	T
NAME	BORTOLIS, EMMANUEL
STREET ADDRESS	106-18 ASTORIA BLVD
CITY-ST-ZIP	E ELMHURST, NY 11369
TITLE	SD
NAME	BORTOLIS, JOHN
STREET ADDRESS	106-18 ASTORIA BLVD
CITY-ST-ZIP	E ELMHURST, NY 11369
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000638016  
02/27/07-80012-016 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EMMANUEL BORTOLIS

2-12-07

Date

Daytime Phone #