2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000027392**

1. Entity Name

FLORIDA ELECTRICAL CONTRACTORS, INC.



FILED Jan 29, 2003 8:00 am Secretary of State

01-29-2003 90289 008 ***150.00

Principal Place 14921 SW 104 \$ #106 MIAMI FL 33196	STREET		14921 #106	g Address SW 104 STREET FL 33196						
2. Principal Place of Business			3. Mai	3. Mailing Address						
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City	City & State			4. FEI Number 65-0739232			oplied For ot Applicable	
Zip		Country	Zip		Country	5.	Certificate of Status Desired		8.75 Addee Require	
	_ 6. Name	and Address of Cur	rent-Registere	d Agent		7	Name and Address of New Re	egistered Ag	ent	
					Name					
GONZALEZ, ANTONIO				Street Address			(P.O. Box Number is Not Acceptable)			
15122 SW 146 AVE				Circuit Addicas						
MIAMI FL 3	3186									
					City			FL	Zip Cod	le
8. The above	named entity	submits this stateme	ent for the our	ose of changing its	reaistered office a	r registered a	gent, or both, in the State of Flo	rida. 1 am fai	miliar with,	and accept
	ions of registe									·
SIGNATURE _	Signature, typed o	r printed name of registered	agent and title if app	olicable. (NOTI	: Registered Agent signa	ture required when	reinstating)	DATE		
		FEE IS \$150.00				/ 73 /11	9. Election Campaign Fina)0 May Be
		3 Fee will be \$550 Florida Departme					Trust Fund Contribution	n. 🗆	Added	d to Fees
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2. 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 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 employeed 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 addition, with all other like empowered.

SIGNATURE:

SIGNATURE AND PRESENT OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)