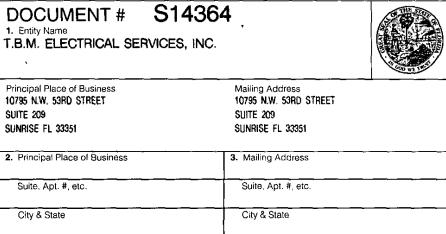
## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**



SIGNATURE:

## FILED May 02, 2003 8:00 am Secretary of State

05-02-2003 90129 039 \*\*\*158.75

T.B.W. ELECTRICAL SERVICES, INC.						<u> </u>				
Principal Place of Business 10795 N.W. 53RD STREET SUITE 209 SUNRISE FL 33351		Mailing Address 10795 N.W. 53RD STREET SUITE 209 SUNRISE FL 33351								
2. Principal Place of Business		3. Mailing Address				T CONTROLE FOR CLEAN EXPLOR FILLING CONTROL BETWEEN BYTCH CONTROL CLOCK BYTCH BYTCH BYTCH				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4. FEI Number 65-0243669 Applied For Not Applicable			le	
Zip	Country	Zip		Country		5. (	Certificate of Status Desired	\$8.75 Fee Rec	Additional uíred	
6.	Name and Address of Current	Register	ed Agent			7. 1	Name and Address of New Register	ed Agent	<del></del>	┪
					Name					
STYLES, MICHAEL J. 629 S.E. 5TH AVE					Street Address (P.O. Box Number is Not Acceptable)					
FT. LAUDERDALE FL 33310										
					City			FL Zip Code		
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										
			1				1			$\dashv$
FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State							S. Election Campaign Financing     Trust Fund Contribution.		5.00 May Be ided to Fees	
10.	OFFICERS AND	DIRECTO	PRS	11.		AD	DITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 11	7
TITLE P			☐ Delete	TITLE				☐ Char	ige 🔲 Addition	ا ﴿
STREET ADDRESS 4392	Majdowski, joan d 4392 Hunting Trail Lake Worth FL 33467				E ET ADDRESS -ST-ZIP					007 100
			Delete	TITLE				Char	ige 🔲 Addition	_ } }
TITLE V	DOWSKI, RICHARD A		FT Delete	NAM	ſ				ige 🗀 Addition	"   č
					ET ADDRESS					
CITY-ST-ZIP LAKE	LAKE WORTH FL 33467			CITY	-ST-ZIP		,	_		
TITLE V			☐ Delete	TITLE				☐ Chan	ge 🔲 Addition	n (
	DOWSKI, JUNE H.			NAM						ļ
STREET ADDRESS 34/5 CITY-ST-ZIP PALM	S OCEAN BLVD #311 I BEACH FL 33480				ET ADDRESS -ST-ZIP					
	I DEMON FL 33400							[] Chan	na [] Addition	-
	OOWSKI, JOAN D.		☐ Delete	: TITLE NAMI	1			☐ Chan	ige 🗌 Addition	1
	HUNTING TRAIL				ET ADDRESS					
	WORTH FL 33467			CITY-	-ST-ZIP					
TITLE			☐ Delete	TITLE			<del></del>	☐ Chan	ge 🔲 Addition	n
NAME				MAM	J					
STREET ADDRESS					ET ADDRESS					}
CITY-ST-ZIP				4—	-ST-ZIP		<del></del>			-
TITLE NAME			☐ Delete	NAME				Chan	ge 🔲 Addition	1
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP	1				ST-ZIP					1
12. I hereby certify t	that the information supplied with	this filing	does not qualify for	the exer	mption stated in Sec	ction 1	119.07(3)(i), Florida Statutes. I further legal effect as if made under oath; tha	certify that t	ne information	7
indicated on this of the corporation changed, or on a	s report or supplemental report is on or the receiver or trustale empo an attachment with an padross, y	true/and wered to rith all oth	accurate and that mexecute this report and like empowered.	ny signat as requir	ure shall have the s red by Chapter 607,	ame I Florid	legal effect as if made under oath; tha da Statutes; and that my name appea	t I am an offi rs in Block 1	cer or director 0 or Block 11 if	