

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 581395

FILED
Apr 19, 2002 8:00 AM
Secretary of State

Entity Name: ALL ELECTRIC & LIGHTING SERVICE, INC.

Current Principal Place of Business:

2415 DESTINY WAY
#1
ODESSA, FL 33556 US

New Principal Place of Business:

423 LORENZO DR.
SPRING HILL, FL 34609 US

Current Mailing Address:

2415 DESTINY WAY
#1
ODESSA, FL 33556 US

New Mailing Address:

P.O. BOX 15002
BROOKSVILLE, FL 34609 US

FEI Number: 59-1844123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRIMI, STEVEN J
5295 CULBREATH RD.
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

CRIMI, STEVEN J
423 LORENZO DR
SPRING HILL, FL 34609 US

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.

SIGNATURE: _____

04/19/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRIMI, STEVEN J
Address: 5295 CULBRAETH RD
City-St-Zip: BROOKSVILLE, FL

Title: O () Delete
Name: CRIMI, CORINE
Address: 5295 CULBREATH RD
City-St-Zip: BROOKSVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRIMI, STEVEN J
Address: 423 LORENZO DR
City-St-Zip: SPRING HILL, FL 34609

Title: O (X) Change () Addition
Name: CRIMI, CORINE
Address: 423 LORENZO DR
City-St-Zip: SPRING HILL, FL 34609

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORINE CRIMI

O

04/19/2002

Electronic Signature of Signing Officer or Director

Date