2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F88704

1. Entity Name

ACTION ELECTRIC CORPORATION OF SARASOTA



FILED Apr 29, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

6130 CLARK CENTER AVE. SUITE 101 SARASOTA, FL 34238 6130 CLARK CENTER AVE. SUITE 101 SARASOTA, FL 34238

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

 04262004
 No Chg-P
 CR2E034 (10/03)

 4. FEI Number
 Applied For Not Applicable

 59-2198145
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

STEVEN S

6. Name and Address of Current Registered Agent

SEPER, STEVEN S 6130 CLARK CENTER AVE SARASOTA, FL 31238

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) CATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				
TITLE	PD			
NAME	SEPER, STEVEN S			
STREET ADDRESS	6130 CLARK CENTER AVE	·		
CITY-ST-ZIP	SARASOTA, FL 34238			
TITLE				
NAME				U000001387SS 04/23/04-80093-015 150.00
STREET ADDRESS				04/29/04-80093-015 150.00
CITY-ST-ZIP	***************************************			
TITLE				
NAME				
STREET ADDRESS			DO	NOT WRITE
CITY-ST-ZIP		·		- ·
TITLE			IN	THIS SPACE
NAME CORDOT ADDRESS				
STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME				
STREET ADDRESS				
CITY-ST-ZIP				
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title Name		ļ		
STREET ADDRESS		1		
CITY-ST-ZIP				
12. 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 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.				

3. 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