


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

7/1

**FILED**  
**Jul 25, 2005 8:00 am**  
**Secretary of State**

07-05-2005 90112 003 \*\*\*158.75

07-25-2005 90108 008 \*\*\*391.25

<b>DOCUMENT # P99000004570</b> 1. Entity Name <b>ARL ELECTRICAL INC.</b>	
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Principal Place of Business <b>8252 S.E. ROYAL STREET HOBE SOUND, FL 33455</b>	Mailing Address <b>8252 S.E. ROYAL STREET HOBE SOUND, FL 33455</b>
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20065543



06302005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0886118</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>AS AM</b>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>METZGER, KRIS 8252 SE ROYAL ST HOBE SOUND, FL 33455</b>
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P METZGER, KRIS 8252 S.E. ROYAL ST HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST METZGER, ANNE 8252 SE ROYAL ST HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP METZGER, JASON 8252 SE ROYAL ST HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP METZGER, CHAD 8252 SE ROYAL ST HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE: Anne Metzger Anne Metzger 6129105 772-220-7234  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*we never received notice*