I hereby 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 all other like empowered.

SIGNATURE: LAUREN FAYE SCHMIDT

Electronic Signature of Signing Officer/Director Detail

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

ne above named e	ntity submits this statement for the purpose of changing its registe	erea office or registe	ered agent, or both, in the State of Florida.	
GNATURE:	HAMLET SEGUROLA		04	4/28/2014
	Electronic Signature of Registered Agent			Date
Officer/Direct	or Detail :			
ïtle F	PSC	Title	CHIEF ADMINISTRATIVE OFFICER	Ł

Of

Officer/Director Detail :					
Title	PSC	Title	CHIEF ADMINISTRATIVE OFFICER		
Name	BATES, CHRISTOPHER J	Name	SCHMIDT, LAUREN F		
Address	P. O. BOX 100	Address	P. O. BOX 100		
City-State-Zip:	IMPERIAL MO 63052	City-State-Zip:	IMPERIAL MO 63052		

SI

FEI Number: 43-1615893

Name and Address of Current Registered Agent:

SEGUROLA, HAMLET

HIALEAH, FL 33014 US

1075 W 77 ST APT 103

Current Mailing Address:

P. O. BOX 100

IMPERIAL, MO 63052

Current Principal Place of Business:

2006 SIERRA PARKWAY ARNOLD, MO 63010

2014 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT DOCUMENT# F13000004606

Entity Name: BATES ELECTRIC SERVICE & TECHNOLOGY, INC.

04/28/2014 CHIEF ADMINISTRATIVE

OFFICER

FILED Apr 28, 2014 Secretary of State CC3679283716

Certificate of Status Desired: No

Date