2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 175271

1. Entity Name

PECO INTERNATIONAL ELECTRIC, INC.



Principal Place of Business

7983-85 NW 33RD ST MIAMI, FL 33122 Mailing Address

7983-85 NW 33RD ST MIAMI, FL 33122

FILED Apr 07, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

 02242004
 No Chg-P
 CR2E034 (10/03)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTTENMACHER, EDWARD 2600 DOUGLAS RD. P A8 CORAL GABLES, FL 33134

SIGNATURE: _

DO NOT WRITE IN THIS SPACE

 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature regulted when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Siection Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000105278 04/07/04-80018-021 150.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOPEZ, JOSE, SR. 6600 S.W. 75TH COURT MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LOPEZ, JULIO 6600 S.W. 75TH COURT MIAMI, FL	-			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LOPEZ, ALINA 6600 S.W. 75TH COURT MIAMS, FL			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOPEZ, JORGE 6600 S.W. 75TH COURT MIAMI, FL			IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CHTY-ST-ZIP					
TITLE NAME STREET ADDRESS 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 active, with all other like empowered.					

NO TYPEGOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR