


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # 384561
1. Entity Name
ATLAS ELECTRIC SUPPLIES OF FLORIDA, INC.



Principal Place of Business 1111 W 22ND ST HIALEAH, FL 33010	Mailing Address 1111 W 22ND ST HIALEAH, FL 33010
--	--

DO NOT WRITE IN THIS SPACE



04182005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-0812272	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**GORDICH, ALAN
1111 NW 22ND ST
HIALEAH, FL 33010**

**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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES GORDICH, ALAN 1111 W 22ND ST HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GORDICH, STEPHEN 1111 W 22ND ST HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC GORDICH, LAWRENCE 1111 W 22ND ST HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANGELLOT, EDWARD 1111 W 22ND ST HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GORDICH, STEPHEN 1111 W 22ND ST HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000330241
04/25/05-80152-004 450.00

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: *Alan Gordich* **4-19-05** **305-885-8941**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #