2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 404853

City-St-Zip:

FORT LAUDERDALE, FL 33305

FILED Jan 14, 2008 Secretary of State

Entity Name: WILSON-O'BRIEN ELECTRIC, INC				
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
1712 NE 20 FT LAUD, F				
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
1712 NE 20 FT LAUD, F				
FEI Number:	59-1407625 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
CAPRIO, CATHY A SEC 1712 NE 20TH ST. FORT LAUDERDALE, FL 33305 US		1712 NE 20TH ST.	CAPRIO, CATHY A STD 1712 NE 20TH ST. FORT LAUDERDALE, FL 33305 US	
The above in the State	named entity submits this statement for the of Florida.	purpose of changing its registered o	office or registered agent, or both,	
SIGNATUR	RE: CATHY A. CAPRIO		01/14/2008	
	Electronic Signature of Registered Ag	ent	Date	
Election Carr	npaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete CAPRIO, DAVID M PRES. 1712 N.E. 20TH ST. FORT LAUDERDALE, FL 33305	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () Delete WILSON, THOMAS A VD 2306 N.E. 17TH AVE. WILTON MANORS, FL 33305	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	STD () Delete CAPRIO, CATHY A STD 1712 N.E. 20 ST.	Title: () Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CATHY A. CAPRIO STD 01/14/2008