

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 08:00 AM
Secretary of State

DOCUMENT # 444542	
1. Entity Name ATLAS ELECTRIC SUPPLIES, INC.	

Principal Place of Business 1111 W 22ND ST PO BO X1300 HIALEAH, FL 33010-1920	Mailing Address 1111 W 22ND ST PO BO X1300 HIALEAH, FL 33010-1920
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DO NOT WRITE IN THIS SPACE



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0812272	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GORDICH, ALAN 1111 WEST 22ND STREET HIALEAH, FL 33010	DO NOT WRITE IN THIS SPACE
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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 reinstating)

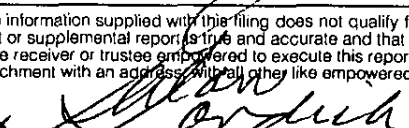
**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

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

1000000712263
04/26/07-80050-007 450.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GORDICH, ALAN 1111 W 22ND ST HIALEAH, FL 330101920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ANGELLOTTI, EDWARD 1111 W 22ND ST HIALEAH, FL 330101920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC GORDICH, LAWRENCE 1111 W 22ND ST HIALEAH, FL 330101920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GORDICH, STEPHEN 1111 W 22ND ST HIALEAH, FL 330101920
TITLE NAME STREET ADDRESS CITY-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 exemptions contained 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 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:  **4-10-07** **305-585-8941**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #