

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 565561

FILED
Mar 21, 2009
Secretary of State**Entity Name:** B. & I. ELECTRICAL CONTRACTORS, INC.**Current Principal Place of Business:**4250 SW 73RD AVE.
MIAMI, FL 33155**New Principal Place of Business:****Current Mailing Address:**9222 SW 136 TERRACE
MIAMI, FL 33176 US**New Mailing Address:****FEI Number:** 59-1797033**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A
BOX 1397783
DELTONA, FL 32725 US**Name and Address of New Registered Agent:**MARSHALL, BRIAN A P
4250 SW 73RD AVENUE
MIAMI, FL 33155 US

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.

SIGNATURE: BRIAN A. MARSHALL

03/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARSHALL, BRIAN A.,
Address: 9222 S.W. 136TH TERR.
City-St-Zip: MIAMI, FL

Title: STD () Delete
Name: MARSHALL, IRENE T.,
Address: 9222 S.W. 136TH TERR.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: BRIAN A. MARSHALL

P

03/21/2009

Electronic Signature of Signing Officer or Director

Date