2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

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Mar 09, 2004 8:00 am **Secretary of State DOCUMENT # 615445** 1. Entity Name 03-09-2004 90028 046 ***150.00 FAME ELECTRIC, INC. Principal Place of Business Mailing Address P.O. BOX 20728 2826 LEXINGTON ST CCCCIUPP SARASOTA FL 34231 SARASOTA FL 34276-0 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 59-1898431 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROGERS,-SOPHIA-C-Street Address (P.O. Box Number is Not Acceptable) 7504 COVENTRY COURT **BRADENTON FL 34202** City Zip Code 8. The above named egitty 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition ROGERS, SOPHIA C NAME NAME 7504 Coventry Court Bradenton FL 34202 STREET ADDRESS #882-PORTER-EXCENSION STREET ADDRESS nor CITY-ST-ZIP SARASCITA FE 34240 CITY-ST-ZIP **VPS** TITLE ☐ Delete TITLE ☐ Change Addition NAME HOYER, ANETTA NAME STREET ADDRESS 2826 LEXINGTON STREET STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34231 CITY-ST-ZIP III F Delete Сhange TITLE □ Addition NAME STRFET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP 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

CER OR DIRECTOR

FILED