2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005921

Entity Name: MAURICE ELECTRICAL SUPPLY COMPANY, INC.

FILED Jan 04, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|--|--|---|---|--|--|
| 500 PENN ST. NE WASHINGTON, DC 20002 | | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 500 PENN ST. NE WASHINGTON, DC 20002 | | | | | |
| FEI Number: 5 | 53-0075290 | FEI Number Applied For () | El Number Not Applicable() | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: | | | | | |
| | Electronic | Signature of Registered Agent | | Date | |
| Election Campaign Financing Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD () E KOGOD, MARK 9209 VENDONE BETHESDA, MD | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | CEOC () E KOGOD, BRUCE 8513 HORSESHO POTOMAC, MD | DE LANE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | ST () E CLARKE, ROBER 209 HERITAGE F MT AIRY, MD 21 | FARM DR | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | GREEN, FAYE | Delete SHIRE AVE NE APT 1421 DC 20037 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | GREEN, DOUGL | UT AVENUE NW SUITE 410 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT E CLARKE JR ST 01/04/2006