2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

2. Principal Place of Deviness 3. Mesting Address 59.715 Surfo, Apt. 8, sec. Suite, Apt. 6, sec. 1st MODRE CR2E034 (10/02 City & States City & State 4. FEI Number S9-2159876 Zip Country Zip Country 5. Certificate of Status Devined \$8.75 Fee Rec. E. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FELU, JOSE RAUL, 13245 SW 55TH ST Street Address (P.O. Box Number to Not Acceptable) 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 into obligations of registered agent. SIGNATURE City FEL S\$ \$150.00 Make Orbeck Payable to Florida Department of State (NOTE Registered Agent Agen	1. Entity Nar	IMENT # F62437 THE LECTRICAL CONTRACTOR	INC.		Secretary of State		
Sunto, Apt. #, etc. Sulto, Apt. #, etc. City & State City & State City & State Country Zip Country E. Country S. Certificate of Status Desired B. The Address of Current Registered Agent FELLU, JOSE RAUL. 13245 SW 55TH ST MIAMI FL 33175 B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. I am familiar into chalgations of registered agent or registered agent, or both, in the State of Rorida. I am familiar into chalgations of registered agent and registered agent. SIGNATURE SUBJECT OF SUBJECT SUBJ	13245 SW 55TH ST 13245 SW 55TH ST						
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B. 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 the obligations of registered agent. SIGNATURE Decision, upwat to printed name of registered agent. Delice	132	245 SW 55TH ST	-	M			
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12. Thereby certify that the information supplied with this fring does not qualify for the exemptions contained in Section 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 direction 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 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TOSE RAW FE LIV

3/30/06 35-607-4447

FILED