

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # H41424

1. Entity Name
CIRACO ELECTRIC, INC.



Principal Place of Business
295 SW 35TH STREET
OCALA, FL 34474 US

Mailing Address
295 SW 35TH STREET
OCALA, FL 34474 US

DO NOT WRITE IN THIS SPACE



01162008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2480711

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLINN, PETER C.
808 SE FT KING ST
OCALA, FL

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000878954
04/15/08-80001-005 150.00

10. OFFICERS AND DIRECTORS

TITLE PDST
NAME CIRACO, MICHAEL
STREET ADDRESS 295 SW 35TH STREET
CITY-ST-ZIP Ocala, FL 34474

TITLE V
NAME CIRACO, LORI
STREET ADDRESS 295 S.W. 35TH ST.
CITY-ST-ZIP Ocala, FL 34474

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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: *x Michael Ciraco Michael Ciraco*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-08
Date

352-629-5976
Daytime Phone #