

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90017 034 ***150.00

DOCUMENT # K10828

1. Entity Name

RMS ELECTRIC, INC.



Principal Place of Business

1501 DECKER AVE
#113
STUART FL 34994
US

Mailing Address

1501 DECKER AVE.
#113
STUART FL 34994
US

2. Principal Place of Business - No P.O. Box #

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0026532

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/07)

6. Name and Address of Current Registered Agent

BRACKENRICH, RICK L
1986 S.W. OAK WOOD ROAD
PORT SAINT LUCIE FL 34953

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Rickard L. Brackenrich - Rickard

1-28-08

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

(NOTE: Registered Agent's signature required when registering.)

DATE

FILE NOW!!! - FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTDV
BROCKKENVICL, RICK L
1986 SW OAKWOOD ROAD
PORT SAINT LUCIE FL 34953 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
BRACKENRICH, RICHARD
1986 S.W. OAKWOOD ROAD
PORT ST. LUCIE FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BRACKENRICH, RICKARD L.
1986 SW OAKWOOD ROAD
PORT ST. LUCIE, FLA. 34953** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 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:

Rickard L. Brackenrich - Rickard

1-28-08

7722201052

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature From