

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029865

Entity Name: ELECTRIC SERVICES, LLC

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

20341 NE 30 AVE
108-6
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

20341 NE 30 AVE
108-6
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 59-3784327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURTIS, LEWIS S
20341 NE 30 AVE
108-6
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BALDONCINI, CRISTIAN
Address: 17570 ATLANTIC BLVD #309
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: MGRM () Delete
Name: CURTIS, LEWIS S
Address: 20341 NE 30 AVE #108-6
City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM (X) Delete
Name: STROUT, FLORA L
Address: 10054 NW 4TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LEWIS S CURTIS

MGRM

01/09/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date