2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED Apr 30, 2007 08:00 All Secretary of State DOCUMENT # L05000036415 1. Enlity Name R.KING ELECTRIC, LLC Principal Place of Business Mailing Address 2925 7TH ST. S.W. 2925 7TH ST. S.W. VERO BEACH FL 32968 VERO BEACH FL 32968 2. Principal Place of Business - No PO. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (10/06) 1st MOORE City & State City & State Applied For 4. FEI Number 20-2684101 Not Applicable Ζıp Ζıp Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KING, RICK L Street Address (P O. Box Number is Not Acceptable) 2925 7TH ST. S.W. VERO BEACH FL 32968 City 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, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. шиг MORM ☐ Delete TITLE ■ Addition PD NAME NAME U00000074443i KING, RICK L STREET ADDRESS STREET ADDRESS 05/15/07-80149-011 50.00 2925 7TH ST. S.W. CITY-ST-ZIP CITY - ST - 7IP VERO BEACH FL 32968 TITLE ☐ Delete TITLE Change Addition NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP ☐ Delele TITLE TIFLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE. TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP THLE ☐ Delete THE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

SIGNATURE: RICK L KING, PRESIDENT 4/26/07 772-778-6044

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Date

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11. 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 is true and accurate and that my 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.