2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 15, 2009
Secretary of State

DOCUMENT# L07000006323

Entity Name: ELET, LLC

Current Principal Place of Business:

6861 SW 196TH AVENUE
BUILDING 300, SUITE 301
PEMBROKE PINES, FL 33332

New Principal Place of Business:

2830 W STATE RD 84
110
DANIA BEACH, FL 33312

Current Mailing Address:

6861 SW 196TH AVENUE
BUILDING 300, SUITE 301
PEMBROKE PINES, FL 33332

New Mailing Address:

2830 W STATE RD 84
110
DANIA BEACH, FL 33312

FEI Number: 20-1904783 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RICHARD A. SCHURR, P.A.
3637 POINCIANA AVENUE
MIAMI, FL 33133 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: FLORIDA BREAKERS AND CONTROLS, INC
Address: 6861 SW 196TH AVE., BLD 300, SUITE 30
City-St-Zip: PEMBROKE PINES, FL 33332

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: FLORIDA BREAKERS AND CONTROLS, INC
Address: 2830 W ST RD 84 STE 110
City-St-Zip: DANIA BEACH, FL 33312

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: FLORIDA BREAKERS AND CONTROLS INC MGRM 06/15/2009

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