. 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

01-20-2005 90020 021 ***150.00 DOCUMENT # L26652 BARKOSKIE ELECTRIC SERVICE, INC. Principal Place of Business Mailing Address 66002087 48 S PENMAN RD P.O. BOX 50325 IAX BCH, FL 32240 IACKSONVILLE BEACH, FL 32250 01132005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2982852 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HUGHES, JAMES T DO NOT WRITE 526 11TH AVE NORTH JACKSONVILLE BEACH, FL 32250 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 Fiorida. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent stansture required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fee 10. OFFICERS AND DIRECTORS TITLE HUGHES, JAMES T NAME 48 S. PENMAN RD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS DO NOT WRITE CITY-67-Zii IN THIS SPACE TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP me NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 chapt file empowered.

FILED Feb 16, 2005 8:00 am

Secretary of State