

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L82536 1. Entity Name COLE ELECTRIC, INC.					
Principal Place of Business 3520 INVESTMENT LANE, #6 RIVIERA BEACH FL 33404			Mailing Address 3520 INVESTMENT LANE, #6 RIVIERA BEACH FL 33404		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt #, etc.		Suite, Apt #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 65-0216594 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent COLE, PHILLIP H 3520 INVESTMENT LANE, #6 RIVIERA BEACH FL 33404	
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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P COLE, PHILLIP 8287 KELSO DR. PALM BCH. GARDENS FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PHILLIP T. COLE 15781 79TH TERRACE NORTH PALM BEACH GARDENS FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MARK L. COLE 2542 MANIKI DRIVE WEST PALM BEACH 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			
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 changed, or on an attachment with an address, with all other like empowered.			U00000255553 03/08/05-80019-009 150.00		
SIGNATURE: <i>Phillip H. Cole</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<i>Phillip H. Cole 2/25/05</i> Date Daytime Phone #		