2005 FOR PROFIT CORPORATION ANNUAL REPORT.

FILED _ Jan 07, 2005 08:00 AM **Secretary of State DOCUMENT # L83480** 1. Entity Name TADCO ELECTRICAL SERVICES, INC. Principal Place of Business Mailing Address 695 MALABAR RD NW 695 MALABAR RD NW PALM BAY, FL 32907 PALM BAY, FL 32907 No Chg-P CR2E034 (10/03) 01042005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3021450 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAVIS, TIMOTHY A DO NOT WRITE TADCO ELECTRICAL SERVICES, INC. 371 TAUNTON RD, S.W. IN THIS SPACE PALM BAY, FL 32908 [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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature 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 Fees OFFICERS AND DIRECTORS 10. TITLE NAME DAVIS, TIMOTHY A STREET ADDRESS 371 TAUNTON RD. S.W. PALM BAY, FL 32908 CITY-ST-ZIP U000001 73691 TITLE 01/07/05-80028-023 150.00 NAME DAVIŞ, PAMELA J STREET ADDRESS 371 TALNTON RD SW CITY-ST-7IP PALM BAY, FL 32908 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 expowered.

CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/05

321-768-6108