

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M04237

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: BARRETT ELECTRIC, INC.

**Current Principal Place of Business:**

6826 NW 32ND CT  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

6826 NW 32ND CT  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 59-2439992

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARRETT, INGRID  
2595 NW 105 LANE  
SUNRISE, FL 33322 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BARRETT, BANVILLE,  
Address: 6826 NW 32ND CT  
City-St-Zip: MARGATE, FL 33063

Title: VP ( ) Delete  
Name: BARRETT, GARY  
Address: 2595 NW105 LANE  
City-St-Zip: SUNRISE, FL 33322 BR

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BANVILLE BARRETT

DIRE

01/11/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date