

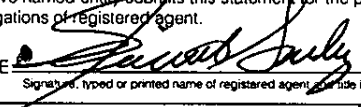
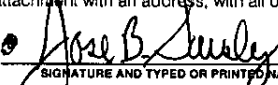


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2004 8:00 am
Secretary of State

04-01-2004 90025 040 ***150.00

DOCUMENT # P00000072094					
1. Entity Name NATIONWIDE ELECTRICAL CONTRACTORS INC.					
Principal Place of Business 7912 NW 64TH CT MIAMI, FL 33166			Mailing Address 7912 NW 64TH CT MIAMI, FL 33166		
2. Principal Place of Business 7914 N.W. 64TH Street Suite, Apt. #, etc.		3. Mailing Address 7914 N.W. 64TH Street Suite, Apt. #, etc.			
City & State Miami, Florida		City & State Miami, Florida		03232004 Chg-P CR2E034 (10/03)	
4. FEI Number 65-1027483		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent SARDUY, JOSE B 7912 NW 64TH ST MIAMI, FL 33166			
7. Name and Address of New Registered Agent Name: Ricardo Sarduy Street Address (P.O. Box Number is Not Acceptable): 7914 N.W. 64TH Street City: Miami FL Zip Code: 33166		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:  Ricardo Sarduy 03/26/04 <small>Signature, typed or printed name of registered agent, as applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD10 SAROVE, JOSE B <input checked="" type="checkbox"/> Delete 7912 NW 64TH ST MIAMI, FL 33166		TITLE P. NAME STREET ADDRESS CITY-ST-ZIP	Ricardo Sarduy <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7914 N.W. 64TH Street Miami, Florida 33166	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, ARNALDO <input type="checkbox"/> Delete 16310 SW 2ND DRIVE PEMBROKE PINES, FL 33027		TITLE VP. NAME STREET ADDRESS CITY-ST-ZIP	Jose B. Sarduy <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7914 N.W. 64TH Street Miami, Florida 33166	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
SIGNATURE:  Jose B. Sarduy 03/26/04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					