2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107244

Entity Name: PEAK ELECTRIC, INC.

FILED Jul 03, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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809 SOUTH ALBANY AVENUE 2200 WEST BRISTOL AVENUE

TAMPA, FL 33606 TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

809 SOUTH ALBANY AVENUE 2200 WEST BRISTOL AVENUE

TAMPA, FL 33606 TAMPA, FL 33606

FEI Number: 59-3682068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHOEN, DONALD L SHOEN, DONALD L PRESIDE 2200 WÉST BRISTOL AVENUE 809 SOUTH ALBANY AVENUE TAMPA, FL 33606 TAMPA, FL 33606

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: DONALD SHOEN 07/03/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SHOEN, DONALD SHOEN, DONALD L PRESIDE Name: Name: 809 SOUTH ALBANY AVE 17505 WILLOW POND DRIVE Address: Address: TAMPA, FL 33606 City-St-Zip: City-St-Zip: LUTZ, FL 33549

Title: Title: MRS. (X) Change () Addition () Delete Name: SHOEN, DONNA Name: SHOEN, DONNA R V.P.

17505 WILLOW POND 17505 WILLOW POND Address: Address: LUTZ, FL 33549 City-St-Zip: LUTZ. FL 33549 City-St-Zip:

Title: () Change (X) Addition Title: () Delete MISS SHOEN, CASEY R SECRETA Name: Name: 17507 WILLOW POND DRIVE Address Address:

City-St-Zip: City-St-Zip: LUTZ, FL 33549

Title: () Delete Title: () Change (X) Addition

SHOEN, JON R TREASUR Name: Name: Address: Address: 17505 WILLOW POND DRIVE

City-St-Zip: City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify 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: DONALD SHOEN **PRES** 07/03/2007