

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038852

Entity Name: INDELEC, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

C/O GLENN M. COOPER & ASSOC.
1560 SAWGRASS CORP. PKWY
SUNRISE, FL 33323

New Principal Place of Business:

C/O GLENN M. COOPER & ASSOC.
1560 SAWGRASS CORP. PKWY, 4TH FLOOR
SUNRISE, FL 33323

Current Mailing Address:

1560 SAWGRASS CORP. PKWY 4# FLOOR
SUNRISE, FL 33323

New Mailing Address:

C/O GLENN M. COOPER & ASSOC.
1560 SAWGRASS CORP. PKWY, 4TH FLOOR
SUNRISE, FL 33323

FEI Number: 65-1097223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, GLENN M ESQ
1560 SAWGRASS CORP. PKWY 4# FLOOR
SUNRISE, FL 33323 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: C () Delete
Name: LEFORT, ARNAUD
Address: 61 CHEMIN DES POSTES
City-St-Zip: DOUAL, FRANCE, 59500

Title: COO (X) Delete
Name: BONNET, GUILLAUME
Address: 1200 WEST AVENUE, #1403
City-St-Zip: MIAMI BEACH, FL 33139

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 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 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: ARNAUD LEFORT

C

04/30/2005

Electronic Signature of Signing Officer or Director

Date