2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P01000112468 01-23-2006 90118 046 ***150.00 ALL ÉLECTRICAL & LIGHTING CORP. Mailing Address Principal Place of Business 20002405 7817 SPRINGFIELD LAKE DRIVE 7817 SPRINGFIELD LAKE DRIVE LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 2. Principal Place of Business 3. Mailing Address 4283 MFLALEUCA LAND 4283 MELALEUCA Suite, Apt. #, etc. Suite, Apt. #, etc. 01102006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For WOMA AKT LAKE WORT 65-1156087 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CERVANTES, SANTIAGO 7817 SPRINGFIELD LAKE DRIVE Street Addr LAKE WORTH, FL 33467 WORTH LAKE 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition TITLE ☐ Delete TIT1 F **K** Change Ceruantes, CERVANTES, SANTIAGO NAME NAME 8224 VIA'L STREET ADDRESS 7817 SPRINGFIELD LAKE DRIVE STREET ADDRESS KE WORTH 3346フ LAKE WORTH, FL 33467 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP Delete TITLE TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied ental 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 any address, with all other like empowered. SIGNATURE:

FILED

Jan 23, 2006 8:00 am