2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

P02000069791 DOCUMENT

1. Entity Name

Principal Place of Business

EGS ELECTRICAL SALES, INC.



May 01, 2003 8:00 am & Secretary of State 05-01-2003 90245 008 ***150.00

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5001 SW 74TH CT SUITE 108 MIAMI FL 33155			5001 SW 74TH CT SUITE 108 MIAMI FL 33155							
2. Principal Pla	ace of Busine	ess	3. Mailing Address						<u> </u>	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4. FE	Number 0464421		pplied For ot Applicable	
Zip	Country		Zip Cour		ntry	5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent				
SPIEGEL &	2ND ST.	P.A.	Name Street Address		s (P.O. Bo	(P.O. Box Number is Not Acceptable)				
4TH FLOOF MIAMI FL 3		X.	City					FL Zip Cod	le	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE										
· · · · · · · · · · · · · · · · · · ·			and the flappineasie.	NOTE. Register	ed Agent signature requ	aned when term	adding)			
After	May 1, 2003	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of	State				Election Campaign Financir Trust Fund Contribution.		00 May Be d to Fees	
10.	······································	OFFICERS AND I	DIRECTORS	11.		ADD	ITIONS/CHANGES TO OFFICERS	S AND DIRECTOR	S IN 11	
NAME STREET ADDRESS		ENRIQUE G 4TH CT., SUITE 108 3155	☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-2IP			☐ Delete		}	مين مين مين		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			- "		☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			·		Change	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.