2007 FOR PROFIT CORPORATION

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED ANNUAL REPORT Jul 05, 2007 08:00 AM DOCUMENT # P02000073769 **Secretary of State** BEAR ELECTRIC, INC. Principal Place of Business Mailing Address 9269 YEARING DR 9269 YEARING DR LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 No Chg-P CR2E034 (11/05) 07022007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-4203041 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALLEN, DAVID DO NOT WRITE 9269 YEARLING DR LAKE WORTH, FL 33467 IN THIS SPACE 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. Lam familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 14, 2007 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE ALLEN, DAVID NAME STREET ADDRESS 9269 YEARLING DR CITY-ST-ZIP LAKE WORTH, FL 33467 U00000767273 07/08/07-80007-017 150.00 TITLE NAME ALLEN, MELANIE A STREET ADDRESS 9269 YEARLING DR CfTY-ST-ZIP LAKE WORTH, FL 33467 TITLE NAME ALLEN, DAVID STREET ADDRESS 9269 YEARLING DR DO NOT WRITE CITY-ST-ZIP LAKE WORTH, FL 33467 IN THIS SPACE ALLEN, MELANIE A NAME STREET ADDRESS 9269 YEARLING DR CITY-ST-ZIP LAKE WORTH, FL 33467 TIT) F

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.