## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Jan 07, 2005 08:00 AM DOCUMENT-# P02000082096 **Secretary of State** WIREWAY'S ELECTRIC COMPANY, INC. Principal Place of Business Mailing Address 12055 SW 18 ST STE 7 12055 SW 18 ST STE 7 MAIMI, FL 33175 **MAIMI, FL 33175** 01042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0801775 Not Applicable \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent GARCIA, RAY DO NOT WRITE 12055 SW 18 ST STE 7 **MAIMI, FL 33175** 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typod or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10, OFFICERS AND DIRECTORS TITLE GARCIA, RAY NAME STREET ADDRESS 12055 SW 18 ST STE 7 CITY-ST-ZIP MAIMI, FL 33175 TITLE NAME U00000174797 01/10/05-80025-005 158.75 STREET ADDRESS CITY ST-719 MLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP IIII E NAME STREET ADDRESS Cffy-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-5-2005 305-505-9921