

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000098210

1. Entity Name  
FLORIDA UNDERGROUND WORKS, INC.



Principal Place of Business  
1504 LAKE BREEZE DR  
WELLINGTON, FL 33414

Mailing Address  
1504 LAKE BREEZE DR  
WELLINGTON, FL 33414

FILED

2007 SEP 17 PM 4:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



09142007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
75-3079797

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, ISAAC  
1504 LAKE BREEZE DR  
WELLINGTON, FL 33414

**DO NOT WRITE  
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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P  
NAME WILLIAMS, ISAAC  
STREET ADDRESS 1504 LAKE BREEZE DR  
CITY - ST - ZIP WELLINGTON, FL 33414

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY - ST - ZIP

000109522570  
09/17/07--01045--024 \*\*150.00

**DO NOT WRITE  
IN THIS SPACE**

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/13/07

Date

Daytime Phone #

9/18/07