2005 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 28, 2005 08:00 AM Secretary of State DOCUMENT # P03000013804 A-RELIABLE ELECTRIC COMPANY INC. Principal Place of Business Mailing Address 12512 TWIN BRANCH ACRES RD. 12157 W. LINEBAUGH AVE. TAMPA, FL 33626 #306 **TAMPA, FL 33626** 04102005 No Cha-P CR2E034 (10/03) OU NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1171889 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent LIMMER, RICHARD F 12157 W. LINEBAUGH AVE #306 THE HASTER TAMPA, FL 33626 5. 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 9. Election Campaign Financing FiLE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. TITLE BONILLA, RICHARD NAME STREET ADDRESS 12512 TWIN BRANCH ACRES RD. U00000339431 04/28/05-80076-015 150.00 CITY-ST-ZIP **TAMPA, FL 33626** TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS o sugare submitte CITY-ST-ZIP TITEF NAME STREET ADDRESS CITY-ST-ZIP mu

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.

SIGNATURE:

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

G OFFICER OR DIRECTOR