

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054576

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: POWER SOURCE ELECTRICAL CONTRACTORS, INC.

## Current Principal Place of Business:

1825 PONCE DE LEON BLVD.  
#360  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

1825 PONCE DE LEON BLVD.  
#360  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 05-0570619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERNANDEZ, ISABEL  
1825 PONCE DE LEON BLVD.  
#360  
CORAL GABLES, FL 33131 US

## Name and Address of New Registered Agent:

FERNANDEZ, DAVID  
1825 PONCE DE LEON BLVD.  
#360  
CORAL GABLES, FL 33131 US

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.

SIGNATURE: DAVID FERNANDEZ

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FERNANDEZ, DAVID JR.  
Address: 1825 PONCE DE LEON BLVD., #360  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP ( ) Delete  
Name: FERNANDEZ, DAVID JR.  
Address: 1825 PONCE DE LEON BLVD., #360  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: LORENTE, RAMON  
Address: 1825 PONCE DE LEON BLVD., #360  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID FERNANDEZ

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date