

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90077 023 ***150.00

DOCUMENT # P03000113952

1. Entity Name

DG SIROIS ELECTRICAL SERVICES, INC.



Principal Place of Business

392 SE WALTERS TERRACE
PORT ST. LUCIE FL 34983

Mailing Address

392 SE WALTERS TERRACE
PORT ST. LUCIE FL 34983

2. Principal Place of Business

2884 S.E. PACE DRIVE

Suite, Apt. #, etc.

3. Mailing Address

2884 S.E. PACE DRIVE

Suite, Apt. #, etc.

City & State

PORT ST. LUCIE, FL

Zip

34984

Country

U.S.A.

City & State

PORT ST. LUCIE, FL

Zip

34984

Country

U.S.A.

4. FEI Number

20-0318329

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME SIROIS, DANIEL G
STREET ADDRESS 392 SE WALTERS TERRACE
CITY-ST-ZIP PORT ST. LUCIE FL 34983

TITLE ☐ Delete
NAME D
STREET ADDRESS SIROIS, DANIEL G
2884 S.E. PACE DRIVE
CITY-ST-ZIP PORT ST. LUCIE, FL 34984

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Daniel G. Sirois DANIEL G. SIROIS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-05

Date

(772) 878-2645

Daytime Phone #