:2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # P03000117374 Apr 02, 2007 08:00 AM Secretary of State SENIOR ELECTRICAL SERVICES INC. Principal Place of Business Mailing Address 8251 NW 8 PL PLANTATION FL 33324 8251 NW 8 PL PLANTATION FL 33324 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, ctc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & Stato 4. FEI Number Applied For 56-2407789 Not Applicable Ζıp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo TORTORA, RICHARD J Street Address (P.O. Box Number is Not Acceptable) 8251 NW 8 PL PLANTATION FL 33324 Zip Code City 8. The above named ontity 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. **DPVS** ☐ Change Addition 11111 Delete HILL TORTORA, RICHARD J NAMI NAME 8251 NW 8 PL STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 CITY-ST-ZIP CITY-SI-ZIP Change ■ Addition 1001 Delete THEF TORTORA, RICHARD J NAMI 8251 NW 8 PL STREET ADDRESS STREET ADDRESS U00000686232 PLANTATION FL 33324 CITY-ST-ZIP CHY-S1-ZIP 04/03/07-80037-69:4-1-35 Addition ши ☐ Defete TITLE NAMI NAM STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CHY-SI-ZIP ☐ Change Addition ☐ Delete NAMI STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-7IP ☐ Delete ■ Addition THIE Change NAMI NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CITY- \$1-7(P) Delete Change ☐ Addition HHI THILL NAMI' NAME STREET ADDRESS STREET LADORESS CHY-SI-7(P CITY-ST-ZIP I horeby cortify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.

Richard J.