## 2005 FOR PROFIT CORPORATION ... ANNUAL REPORT

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

## Mar 09, 2005 08:00 AM Secretary of State DOCUMENT # P03000119478 1. Entity Name SEERAM ELECTRIC, INC. Principal Place of Business Mailing Address 16789 W MAYFAIR DR 16789 W MAYFAIR DR LOXAHATCHEE, FL 33470 LOXAHATCHEE, FL 33470 CR2E034 (10/03) 03052005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-3135262 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOOMAR, L. GREGORY E ESQUIRE DO NOT WRITE 1152 N UNIVERSITY DR PEMBROKE PINES, FL 33024 IN THIS SPACE 3. 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE U000000256505 SEERAM, RAMESH NAME 03/09/05-80018-001 150.00 STREET ADDRESS 16789 W MAYFAIR DR CITY-ST-ZIP LOXAHATCHEE, FL 33470 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 empoyered 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 file empowered.

**FILED** 

Daytime Phone #