

2004 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90039 008 ***150.00

DOCUMENT # P 03000119943

1. Entity Name

Arnold E. Thompson Electric, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1307 N.W. 8th Ct.

3. Mailing Address
1307 N.W. 8th Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Boynton Beach, FL

City & State
Boynton Beach, FL

4. FEI Number
20-0403173

Applied For
☐ Not Applicable

Zip
33426

Country
Palm Beach

Zip
33426

Country
Palm Beach

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Dean, Henry L., C.P.A., P.A.

Street Address (P.O. Box Number is Not Acceptable)
Del Ida Park Professional District
251 N.E. Dixie Blvd.

City Delray Beach, **FL** **Zip Code** 33444

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE P
NAME Nina L. Thompson
STREET ADDRESS 1307 N.W. 8th Ct.
CITY-ST-ZIP Boynton Beach, FL 33426

TITLE V.P.
NAME Arnold E. Thompson
STREET ADDRESS 1307 N.W. 8th Ct.
CITY-ST-ZIP Boynton Beach, FL 33426

TITLE V.P.
NAME Jeffrey A. Thompson
STREET ADDRESS 1307 N.W. 8th Ct.
CITY-ST-ZIP Boynton Beach, FL 33426

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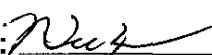
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CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **NINA L. Thompson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/04 561-736-6061
Date **Daytime Phone #**

CR2E034B (12/01)