## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

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

## Jul 19, 2004 8:00 am **Secretary of State DOCUMENT # P03000149617** 07-19-2004 90013 013 \*\*\*150.00 B & B ELECTRICAL SERVICES, INC. Mailing Address Principal Place of Business **7532 CALVIN LEE ROAD** 7532 CALVIN LEE ROAD GROVELAND, FL 34731 GROVELAND, FL 34731 3. Mailing Address 2. Principal Place of Business 7532 Calvin Lee Rd Suite, Apt. #, etc. Suite, Apt. #, etc. 07152004 CR2E034 (10/03) Applied For 4. FEI Number City & State City & State Groveland fi Groveland Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARPER, WILLIAM R JR. Street Address (P.O. Box Number is Not Acceptable) **7532 CALVIN LEE ROAD** GROVELAND, FL 34731 City 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 (NOTE: Registered Agent signature required when reinstating) is the 1st Notice **\$5.00** May Be 9. Election Campaign Financing FILE NOWN FEE'S \$550.00 Due by September 8, 2004 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change Addition TITLE Delete TITI F HARPER, WILLIAM R JR. NAME Keliv Harper Rd 7532 Calvir Lee Rd 7532 Carvirland, FL 34736 7532 CÁLVIN LEE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GROVELAND, FL 34731 CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition FITLE ☐ Delete TiTLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CfTY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS 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

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