


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 8:00 am
Secretary of State


04-24-2006 90415 031 ***150.00

DOCUMENT # P03000153640 1. Entity Name CMH ELECTRICAL SERVICES & DESIGN, INC.	
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Principal Place of Business 8950 DR.M.L.KING JR STREET NORTH SUITE 110 ST. PETERSBURG, FL 33702	Mailing Address 516 7TH STREET SE LARGO, FL 33771
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DO NOT WRITE IN THIS SPACE

PO Box 100
Largo FL 33771 0059844



03082006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2423413	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, GREGORY B
516 7TH STREET SE
LARGO, FL 33771

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

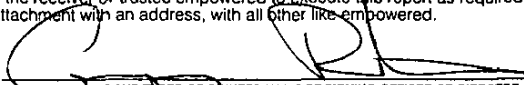
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROBINSON, GREGORY B 516 7TH STREET SE LARGO, FL 33771
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ROBINSON, MICHELLE 516 7TH STREET SE LARGO, FL 33771
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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:  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

4/11/06 727-235-1770
Day Daytime Phone #