


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 30, 2005 8:00 am**  
**Secretary of State**

08-01-2005 90024 019 \*\*\*150.00

<b>DOCUMENT # P04000019639</b> 1. Entity Name <b>ACTION ELECTRICAL CORP.</b>																													
Principal Place of Business 11017 US 92 EAST #9 SEFFNER FL 33584			Mailing Address 11017 US 92 EAST #9 SEFFNER FL 33584																										
2. Principal Place of Business <b>815 Chastain rd</b> Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 1144</b> Suite, Apt. #, etc.																											
City & State <b>Seffner Fla</b> Zip <b>33584</b>		City & State <b>Mango Fla</b> Zip <b>33550</b>		4. FEI Number <b>42-1616605</b>																									
Country <b>U.S.A.</b>		Country <b>U.S.A.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>O'NEAL, WILLIAM EARL JR</b> <b>11017 US 92 EAST #9</b> <b>SEFFNER FL 33584</b>				7. Name and Address of New Registered Agent Name <b>William E. O'Neal Jr.</b> Street Address (P.O. Box Number is Not Acceptable) <b>815 Chastain rd</b> City <b>Seffner</b>																									
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 <b>William E. O'Neal Jr.</b> <small>Signature, typed or printed name of registered agent and title (if applicable)</small>				DATE <b>7-25-05</b> <small>(NOTE: Registered Agent signature required when re-registering)</small>																									
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PTD <input checked="" type="checkbox"/> Delete</td> <td style="width: 40%;">NAME</td> </tr> <tr> <td>NAME</td> <td>O'NEAL, WILLIAM</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>11017 US 92 EAST #9</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>SEFFNER FL 33584</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">President-Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td style="width: 40%;">NAME</td> </tr> <tr> <td>NAME</td> <td>William O'Neal</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>815 Chastain rd Seffner Fla</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>33584</td> <td></td> </tr> </table> </div> </div>						TITLE	PTD <input checked="" type="checkbox"/> Delete	NAME	NAME	O'NEAL, WILLIAM		STREET ADDRESS	11017 US 92 EAST #9		CITY-ST-ZIP	SEFFNER FL 33584		TITLE	President-Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	NAME	William O'Neal		STREET ADDRESS	815 Chastain rd Seffner Fla		CITY-ST-ZIP	33584	
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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 changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <b>William E. O'Neal Jr.</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <b>7-25-05</b> <small>Daytime Phone #</small>																									



ATTACHMENT

6602 6672

FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State

August 3, 2005

ACTION ELECTRICAL CORP.  
P.O. BOX 1144  
MANGO, FL 33550

Subject: ACTION ELECTRICAL CORP.

Reference Number:

P04000019639

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS

ANNUAL REPORTS SECTION