


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

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FILED
Mar 21, 2007 8:00 am
Secretary of State

03-01-2007 90019 002 ***150.00

DOCUMENT # P04000031061 1. Entity Name BOWLES ELECTRICAL CONTRACTOR INC.	
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Principal Place of Business 13224 PIKE LAKE DR. RIVERVIEW, FL 33569	Mailing Address 13224 PIKE LAKE DR. RIVERVIEW, FL 33569
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02222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2797940	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 BOWLES, SAMUEL SR. 13224 PIKE LAKE DR. RIVERVIEW, FL 33569
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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 reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOWLES, SAMUEL SR. 13224 PIKE LAKE DR. RIVERVIEW, FL 33569
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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 507, 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: Samuel Bowles **3-15-07** **813-546-2446**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone