2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _

FILED May 02, 2006 08:00 Al Secretary of State

Daytime Phone #

ANNUAL REPURI				May 02, 2006 08:00			
1. Entity Nan	MENT # P0400009336 ECTRICAL, INC.	6		- ***	Šecre	etary of Stat	
Principal Plac 4866 N W 1: PLANTATION		-	f in e ild h i i i n b i i i				
C	OO NOT WRITE II	04062006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 20-1334290 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent ADAMS, GERALD J 113 N FEDERAL HWY DANIA BCH, FL 33004			DO NOT WRITE IN THIS SPACE				
the obligat	named entity submits this statement for the plions of registered agent. Signature, typed or printed name of registered agent and title E NOWILL FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		rd Agent signature required		[*] DA [*]		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PTD WILLIAMS, LEANDREW 4866 N W 1ST ST PLANTATION, FL 33317 VS WILLIAMS, ELAINE 4866 N W 1ST ST PLANTATION, FL 33317	CTORS		DO N	1/00/00/0558 05/17/06-800	97-002 150.00 FE	
	certify that the information supplied with this is on this report or supplemental report is frue a poration or the receiver or trustee emprovered or on an attachment with an address with all	ling does not qualify for the extend accurate and that my signat to execute this report as required the like empowered.	emptions contained ture shall have the s red by Chapter 607	in Chapter 119, Flo ame legal effect as Florida Statutes; an	rida Statutes. I further if made under oath; that if name appear	certify that the information t I am an officer or director rs in Block 10 or Block 11 if	