2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000118709

1 Entity Name

ULTIMATE ELECTRICAL DESIGNS & INSTALLATIONS INC

Principal Place of Business

MIAMI, FL 33160 US

Mailing Address

2385 NE 173RD ST A105 2385 NE 173RD ST

A105

MIAMI, FL 33160 US

FILED Apr 28, 2006 8:00 am Secretary of State

04-28-2006 90209 008 ***150.00



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

5. Certificate of Status Desired

\$8.75 Addition Fee.Required

Daytime Phone #

SMITH, DAMON 110 NW 198 ST MIAMI, FL 33169

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. If am familiar with, and accept the obligations of registered agent. | | | | | |
|---|--|-------|-------------------------------|--------------------------------|----|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (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 Finance Trust Fund Contribution. | | | cing | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | CTORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SMITH, DAMON 110 NW 198 ST MIAMI, FL 33169 | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | VP DAVEY, GREGORY 1061 NW 195 ST ≟MIAMI, FL 33169 | | | - | ·· |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | DO NOT WRITE IN THIS SPACE | | |
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| 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 authors with all other like empowered. | | | | | |

PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR