

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006564

FILED  
Sep 05, 2006  
Secretary of State

Entity Name: CLEAR CHOICE ELECTRIC, INC.

## Current Principal Place of Business:

12719 S.W. 63 CIR,TERR  
MIAMI, FL 33183

## New Principal Place of Business:

## Current Mailing Address:

12719 S.W. 63 CIR,TERR  
MIAMI, FL 33183

## New Mailing Address:

FEI Number: 20-2157848      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CASIN, RAUL L JR  
12719 S.W. 63 CIR,TERR  
MIAMI, FL 33183      US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CASIN, RAUL JR  
Address: 12719 S.W. 63 CIR,TERR  
City-St-Zip: MIAMI, FL 33183 US

Title: VP ( ) Delete  
Name: CASIN, MARTHA  
Address: 12719 S.W 63 CIR,TERR  
City-St-Zip: MIAMI, FL 33183 US

Title: TSD ( ) Delete  
Name: CASIN, RAUL SR  
Address: 2915 S.W. 106 AVE  
City-St-Zip: MIAMI, FL 33165 US

Title: VP ( ) Delete  
Name: MEDINA, SILVIO  
Address: 1363 NE 182 ST N  
City-St-Zip: MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAUL CASIN JR

PRES

09/05/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date