## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000081595

FILED Apr 24, 2008 Secretary of State

| Entity Name: ASSOCIATED ELECTRICAL SERVICES INC.  |   |   |   |  |  |
|---|---|---|---|--|--|
| Current Pri   | incipal Place   | of Business:                                      | New Principal Place                         | New Principal Place of Business:   |  |
| 800 NE 42N<br>POMPANO   | ID ST<br>BEACH, FL                                    | 33064   |   |  |  |
| Current Ma  | ailing Addres   | s:  | New Mailing Addres                          | New Mailing Address:   |  |
| 800 NE 42N<br>POMPANO   | ID ST<br>BEACH, FL                                    | 33064   |   |  |  |
| FEI Number:   | 20-2960423  | FEI Number Applied For ( )                        | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )  |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |   |   |   |  |  |
| 11380 PRO   |   | NS NETWORK INC.<br>RMS RD #221E<br>S, FL 33410 US | 1522 SANDPIPER CI                           | LAW OFFICE OF CHARLES EISS<br>1522 SANDPIPER CIRCLE<br>WESTON, FL 33327 US |  |
| The above in the State  |   | submits this statement for the p                  | urpose of changing its registere            | ed office or registered agent, or both,                                    |  |
| SIGNATURE: CHALRES EISS   |   |   |   | 04/24/2008   |  |
|   | Electron  | ic Signature of Registered Age                    | ent   | Date   |  |
| Election Cam  | paign Financing                                       | g Trust Fund Contribution ( ).                    |   |  |  |
| OFFICERS AND DIRECTORS:   |   |   | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:                               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ( )<br>CRESPO, NICO<br>800 NE 42ND S<br>POMPANO BEA | iT  | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ( )<br>CASTRO, ANGI<br>800 NE 42ND S<br>POMPANO BEA | ST.   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition  |  |

I hereby certify that the information supplied with this filing does not qualify 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: NICOLAS CRESPO 04/24/2008 D