

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138244

FILED
Mar 29, 2006
Secretary of State

Entity Name: LIU-ELECTRIC SERVICES, INC.

Current Principal Place of Business:

3705 SW 89TH CT
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

3705 SW 89TH CT
MIAMI, FL 33165

New Mailing Address:

FEI Number: 20-3609277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYA, RENE L
3705 SW 89TH CT
MIAMI, FL 33165 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOYA, RENE L
Address: 3705 SW 89TH CT
City-St-Zip: MIAMI, FL 33165

Title: VP () Delete
Name: MOYA, YAMIL
Address: 3705 SW 89TH CT
City-St-Zip: MIAMI, FL 33165

Title: TS () Delete
Name: MOYA, ANA G
Address: 3705 SW 89TH CT
City-St-Zip: MIAMI, FL 33165

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:

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: RENE MOYA

PD

03/29/2006

Electronic Signature of Signing Officer or Director

_____ Date