2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 19, 2007 8:00 am Secretary of State

02-19-2007 90058 022 ***150.00 DOCUMENT # P06000055202 YOUNG'S ELECTRICAL SERVICES, INC. 40050222 Principal Place of Business Mailing Address 12236 CR 721 12236 CR 721 WEBSTER, FL 33597 WEBSTER, FL 33597 2. Principal Place of Business - No P.Q. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02102007 CR2E034 (12/06) Cha-P 4. FEI Number 36151 Applied For City & State City & State Not Applicable 2ip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YOUNG, KENNETH A Street Address (P.O. Box Number is Not Acceptable) 12236 CR 721 WEBSTER, FL 33597 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and titld if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DPTS Delete ☐ Addition DULF TITLE Change YOUNG, KENNETH A NAME NAME STREET ADDRESS 12236 CR 721 STREET ADDRESS CITY-S1-ZIP WEBSTER, FL 33597 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition mn NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STRUET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Delete MLE ☐ Change ☐ Addition THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete HHE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP

12. Thereby 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 address, with all other like empowered

SIGNATURE: