Mar. 5. 2007 9:52AM corpotax

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007 8:00 am
Secretary of State
03-15-2007 90035 014 ***150.00

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1. Entity Name
BENTECH ELECTRICAL CONTRACTORS, INC.

Principal Place of Business	Mailing Address
6710 BULLRUN ROAD #G 364 MIAMI LAKES, FL 33014	6710 BULLRUN ROAD #G 364 MIAMI LAKES, FL 33014

03052007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
6710 Bull Run Road	6710 Bull Run Rd.
Suite, Apt. #, etc. G364	Suite, Apt. #, etc. G364
City & State: Miami Lakes, Florida	City & State: Miami Lakes, Florida
Zip: 33014 Country: U.S.A.	Zip: 33014 Country: U.S.A

4. FEI Number 20-5541217 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BENITEZ, JORGE A S 6710 BULLRUN ROAD #G 364 MIAMI LAKES, FL 33014	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 Jorge A. Benitez 3/6/07
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, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BENITEZ, RAMON P 6710 BULLRUN ROAD #G 364 MIAMI LAKES, FL 33014	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BENITEZ, JORGE A 6710 BULLRUN ROAD #G 364 MIAMI LAKES, FL 33014	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 address, with all other like empowered.

SIGNATURE: R Benitez / Ramon P. Benitez 3/6/07 (305)323-6893
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #