2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2008
Secretary of State

DOCUMENT# P07000059556

Entity Name: ROYAL ELECTRICAL SUPPLY OF PALM BEACH, INC.

Current Principal Place of Business:

5415 COLLINS AVE., #506
MIAMI BEACH, FL 33147

New Principal Place of Business:

3200 SHAWNEE AVE
WEST PALM BEACH, FL 33409

Current Mailing Address:

5415 COLLINS AVE., #506
MIAMI BEACH, FL 33147

New Mailing Address:

3200 SHAWNEE AVE
WEST PALM BEACH, FL 33409

FEI Number: 26-0232392 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORDA, LUIS
5415 COLLINS AVE., #506
MIAMI BEACH, FL 33147 US

Name and Address of New Registered Agent:

SCALISE, MICHAEL
3200 SHAWNEE AVE
WEST PALM BEACH, FL 33409 US

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: MICHAEL SCALISE 03/01/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NORDA, LUIS
Address: 5415 COLLINS AVE., #506
City-St-Zip: MIAMI BEACH, FL 33147

Title: D ( ) Delete
Name: NORDA, ISABEL
Address: 5415 COLLINS AVE., #506
City-St-Zip: MIAMI BEACH, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NORDA, LUIS
Address: 3200 SHAWNEE AVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D (X) Change ( ) Addition
Name: NORDA, ISABEL
Address: 3200 SHAWNEE AVE
City-St-Zip: WEST PALM BEACH, FL 33409

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: ISABEL NORDA D 03/01/2008
Electronic Signature of Signing Officer or Director Date