2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P93000051109

BISON ELECTRICAL SERVICES, INC.



FILED Feb 18, 2008 08:00 AN Secretary of State

Principal Place of Business

744 - 44TH AVE. NORTH ST. PETERSBURG, FL 33703

744 - 44TH AVE. NORTH ST. PETERSBURG, FL. 33703



DO NOT WRITE IN THIS SPACE

01092008 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-3193326 Not Applicable 5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and little if applicable

LEWIS, PAUL C 744 - 44TH AVE. NORTH ST. PETERSBURG, FL 33703 DO NOT WRITE IN THIS SPACE

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.	

(NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE 18 \$150.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME LEWIS, PAUL C 744 44TH AVE. NORTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG, FL TITLE NAME LEWIS, MARY H. STREET ADDRESS 744 44TH AVENUE NORTH CITY-ST-ZIP SAINT PETERSBURG, FL 33703 TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE

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 attachmen

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP