


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2006 08:00 AM
Secretary of State

| | | |
|---|---|---|
| DOCUMENT # P93000076503 | |  |
| 1. Entity Name UNDERGROUND SPECIALISTS, INC. | | |
| Principal Place of Business 2040 NW 40 CT #3 POMPAÑO BEACH, FL 33064 US | Mailing Address 2040 NW 40 CT #3 POMPAÑO BEACH, FL 33064 US | |



07102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|--|--|
| 4. FEI Number 65-0446335 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

**JENKINS, RICHARD A
3720 NE 30 AVE
LIGHTHOUSE POINT, FL 33064**

**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.

SIGNATURE *Richard Jenkins* *president* *Beverly Jenkins* *7.10.06*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

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

10. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------------|
| TITLE | P |
| NAME | JENKINS, RICHARD A |
| STREET ADDRESS | 3720 NE 30 AVE |
| CITY-ST-ZIP | LIGHTHOUSE PT, FL 33064 |
| TITLE | D |
| NAME | JENKINS, BEVERLY |
| STREET ADDRESS | 3720 NE 30 AVE |
| CITY-ST-ZIP | LIGHTHOUSE PT, FL 33064 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Jenkins *7.10.06* *954-978-6888*
Date Daytime Phone #