FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

AIVI	1996	*****	etary of State F CORPORATIONS			
DOCU 1. Corporal	JMENT # P9400	00013199 (2	2)			
CON	MMAND ELECTRICAL SERVI	CES, INC.		1 (10)(10) (10) (10)) (10)(10)	I Cl ina do iði hagg hag	I PICING NAME HAN HAN
Principal Pia	ice of Business	Mailing Address				
7004 657						arara incia lait (60)
	PARK FL 34665	7004 65TH WAY N PINELLAS PARK FL (34665			
				Date Incorporated or Qualified 02/14/1994	3a. Date of Las	
	Place of Business	2a. Mailing Address		4. F&I Number	05/01/	Applied For
Suite, Apl	I # etc	[26]		59-3232352		Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired		75 Additional
City & Sta	ate	City & State		6. Election Campaign Financing	Fe	e Required
23 Zip	Oncertain	28		Trust Fund Contribution		.00 May Be ded to Fees
24	Country 25	Zip [29]	Country	8. This corporation has liability for in	tangible tax under	
	9. Name and Address of Currer	nt Registered Agent	30	Florida Statutes Yes 10. Name and Address of New Re	□No	
			81 Name	10, Walle allo Aboress of New Re	gistered Agent	
Bulmanski, Richard H 7004 65th Way N Pinellas Park Fl 34665			82 Street Add	ess (P.O. Box Number is Not Acceptable	,	
				ess (* Fox Normber is Not Acceptable	1)	
FINEL	LAS PAHK FL 34665		83			
			84 City		85	Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	E the shorp population		FL °°	0000
or registe familiar w	ered agent, or both, in the State of Floric rith, and accept the obligations of, Secti	la. Such change was authorize	d by the corporation's boar	ation submits this statement for the purpord of directors. I hereby accept the appoin	ose of changing its atment as register	registered office
SIGNATURE					-	
12.	Signature, typed or printed name of registered agent	and title if applicable. NOT	E: Hegistered Agent signature required	t when remstating)	DATE] <u>.</u>
TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECT	ORS IN 12 Addition
NAME	BULMANSKI, RICHARD H	L.J DERCTE	1. 1 70 LE 1.2 NAME		Change	Addition
STREET ADDRESS	5600 25TH AVE N		1.3 STREET ADDRESS			
CITY-SI-7IP	ST PETERSBURG FL 33710		1.4 CITY-ST-ZIP			[
TiTLE	T	DE LETE	2 1 TITLE		Change	Addition C
NAME	BULMANSKI, SYLVIA A		2.2 NAME		v migo	C) ADDITION
STREET ADDRESS CITY - ST - ZIP	5600 25TH AVE N ST PETERSBURG FL 33710		2.3 STREET ADDRESS			
Tille	V	DELETE	2.4 CITY - ST - ZIP			
NAME	MENTH, FRED J	L'I orrett	3 1 1 I I L E		☐ Change	☐ Addition
STREET ADDRESS	232 BATH CLUB BLVD N		3.2 NAME 3.3 STREET ADDRESS			1
CITY - ST - ZIP	N REDINGTON BEACH FL 33	708	34 CHY-ST-ZIP			
IIILE	S NEATH DAD!	☐ DELETE	4.1 TITLE		Change	Addition
NAME RADEET ADDOGGO	MENTH, DARLENE M		4.2 NAME		· · · · · · · · ·-	
STREET ADDRESS CITY-S1-ZIP	232 BATH CLUB BLVD N N REDINGTON BEACH FL 33	700	4.3 STREET ADDRESS			
INLE	TO NEDITATION DEACH FL 33	DELETE	4.4 C/TY+ST-Z/F*		+	
IAME		[DELETE	5.1 TITLE 5.2 NAME		Change	Addition
TREET ADDRESS			5.3 STREET ADDRESS			
ITY - ST - ZIP			5.4 CITY - ST - ZIP			
IILE		☐ DELETE	6. 1 TITLE		Change	Addition
AME TREET ADDRESS			6.2 NAME		FT Ammige	Lui raono I
TREET ADDRESS ITY-ST-ZIP			6.3 STREET ADDRESS			1
111 01 21			■			- 1
I. I do hereby	certify that the information supplied with	h this filing is valuntarily furnish	64 CITY - ST - ZIP	Al .		

. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE;

PICH OR DIRECTOR

4/39/11 545-8784