

FILED  
May 06, 2003 8:00 am  
Secretary of State

05-06-2003 90052 030 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           |                                                                                                                          |                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P94000026358</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                           |                                         |                                                                                                                                           |
| 1. Entity Name<br><b>LIGHTNING ELECTRIC OF CENTRAL FLORIDA, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                           |                                                                                                                          |                                                                                                                                           |
| Principal Place of Business<br>2131 GRAND NATIONAL DRIVE<br>STE 106<br>ORLANDO, FL 32819                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                           | Mailing Address<br>2131 GRAND NATIONAL DRIVE<br>STE 106<br>ORLANDO, FL 32819                                             |                                                                                                                                           |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                           | 3. Mailing Address<br><b>P.O. Box 196073</b><br>Suite, Apt. #, etc.                                                      |                                                                                                                                           |
| City & State<br><b>Winter Springs, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                           | 4. FEI Number<br><b>59-3244864</b>                                                                                       |                                                                                                                                           |
| Zip<br><b>32719</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country<br><b>Seamless Change</b>                                                                         | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                          |                                                                                                                                           |
| 6. Name and Address of Current Registered Agent<br><b>OSSINSKY, MARC P<br/>210 N. WYMORE RD.<br/>WINTER PARK, FL 32789</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                           | 7. Name and Address of New Registered Agent<br><b>SIROUS Ghanimati<br/>1131 Grand National Dr.<br/>Orlando, FL 32819</b> |                                                                                                                                           |
| 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.<br><br>SIGNATURE <u><i>Steve Weiner</i></u> DATE <u><b>4.30.03</b></u><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when resigning)</small>                                                                                                                                                                                  |                                                                                                           |                                                                                                                          |                                                                                                                                           |
| <b>FILE NOW! FEE IS \$150.00</b><br><small>After May 1, 2003 Fee will be \$560.00<br/>Make Check Payable to Florida Department of State</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |                                                                                                                                           |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                           | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                             |                                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | PT<br>WEINER, STEVE L.<br>1122 KEMPTON CHASE PARKWAY<br>ORLANDO, FL 32837 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                           | CEO<br>SIROUS Ghanimati<br>1131 Grand National Dr.<br>Orlando, FL 32819 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                         |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Steve Weiner</i></u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                           | Date <u><b>4.30.03</b></u><br><small>Date Daytime Phone #</small>                                                        |                                                                                                                                           |

CH12E034 (1/01/02)