

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000077951

1. Entity Name
FRC-ELECTRICAL INDUSTRIES CORPORATION



Principal Place of Business
1260 CLEARMONT ST., N.E.
PALM BAY, FL 32905

Mailing Address
1260 CLEARMONT ST., N.E.
PALM BAY, FL 32905



03162005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3274402

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EL-MAHDAWY, AHMED
1260 CLEARMONT STREET NE
PALM BAY, FL 32905

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000329713
04/25/05-80128-002 158.75

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
EL-MAHDAWY, AHMED E
1260 CLEARMONT ST., N.E.
PALM BAY, FL 32905

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EL-MAHDAWY, FAWZIA
1260 CLEARMONT ST. NE
PALM BAY, FL 32905

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ELMAHDAWY, AHMED M
1260 CLEARMONT ST. NE
PALM BAY, FL 32905

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-05

Date

321-676-3366

Daytime Phone #