**2003 FOR PROFIT CORPORATION** 

## UNIFORM BUSINESS REPORT (UBR) P95000011090

DOCUMENT #

PREFERRED ELECTRIC SERVICE, INC.

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**FILED** Aug 01, 2003 8:00 am Secretary of State

08-01-2003 90060 036 \*\*\*550.00

2. Percepti Place of Business   3. Mailing Address    Sufe, Apt. 4, etc.   Suite, Apt. 4, etc.   CHECK HERE IF MAKING CHANGES    Chy & Store	Principal Place of Business 2315-B BRUNER LN FT MYERS FL 33919  Mailing Address 2315-B BRUNER LN FT MYERS FL 33919  FT MYERS FL 33919													
City & State    City & State   City & State   City & State   City & State   City & State   City & State   City & State   City   State   Se-0559303   Applied for   Not Applicable   Not Applicable   Se-0559303   Se-0579   Not Applicable   Se-0559303   Not Applicable   Se-0559303   Not Applicable   Se-0559303   Not Applicable   Se-0559303   Not Applicable   Se-059303   Not Applicable   Se-059303   Not Applicable   See   Not	2. Principal P	lace of Busin	ess	3. Maili	ng Address	Address					<b>   </b>		i	
Zip Country Zip Country 5. Certificate of Status Desired Desired Status Desired De	Suite, Apt.	#, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
**************************************	City & State	e		City & State				4.	FEI Number	65-05593	303	<u> </u>		
MAITERS, ROY D 8300 S POINT BLVD, UNIT 454 FT MYERS FL 33919  6. The deployer named entry 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 society the childraphins of registered agent, problem, include their submits of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am familiar with, and society the childraphins of registered agent, or both, in the State of Florida. I am fam	Zip	. Country Zip Cou				Count	try	5.	Certificate of	Status Desire	d 🗆			
Street Address (PO. Box Number is Not Acceptable)  Street Address (PO. Box Number is Not Acceptable)  City FL Zip Code  8. The proper is named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the chippelatines of registered agent, or both, in the State of Florida. I am familiar with, and accept the chippelatines of registered agent.  Signature. Index of printer name of registered spent and title I application.  (NOTE Registered Agents operating in registered agent, or both, in the State of Florida. I am familiar with, and accept the chippelatines of registered agent.  Signature. Index of printer name of registered spent and title I application.  (NOTE Registered Agent agrature required when crutating)  PARET FILE NOW!!! FEE: IS \$550.00  After September 10, 2003 Fee will be \$750.00  After September 10, 2003 Fee will be \$750.00  Make Check Payable to Florida Department of State  10. Applications of registered agent.  MALERS, ROY D  SITEST ADDRESS  OTHY-ST-2P  TITLE  MAKE  STREET ADDRESS  OTHY-S		6. Name	and Address of Current I	Registered	d Agent			7.	Name and A	ddress of Ne	w Register	ed Agent		
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THE NOW!! FEE-IS \$550.00 After September 10, 2003 Exp will be \$750.00 Make Check Payable to Florida Department of State  10.			UNIT 454						1.0	• • • •				
the obligations of registered ageat.  SIGNATURE    Signature   Sig					,		,		FL Zip Code					
FILE NOW!! FEE_IS \$50.00 May Be Added to Feesbreak Department of State    Page	the obligat	ions of regist	ered agent.	·		registere	ed office or	registered ag	ent, or both,	in the State o	f Florida. Ta	am familíar with	n, and accept	
After September 10, 2003 face will be \$750.00 Make Check Payable to Florida Department of State  10. SEFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT	, orani, ironic :	Signature, typed	or printed name of registered agent a	nd title if applic	cable. (NOTE	: Registered	d Agent signatu	re required when re	einstating)		DAT	ΤE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S	After September 10, 2003 Fee will be \$750.00								1		_	\$ <b>5.</b>	00 May Be ed to Fees	
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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:** 

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