## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## May 03, 2004 8:00 am Secretary of State DOCUMENT # P96000087724 1. Entity Name 05-03-2004 90709 027 \*\*\*150.00 PRO ELECTRIC, INC. Principal Place of Business Mailing Address PO BOX 210606 ROYAL PALM BEACH FL 33421 331 SANDPIPER AVENUE **ROYAL PALM BEACH FL 33411** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 65-0707172 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent -SWIERZKO, KARL A 331 SANDPIPER AVENUE Street Address (P.O. Box Number is Not Acceptable) **ROYAL PALM BEACH FL 33411** City Zip Code 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VTS TITI E Change ☐ Addition TIΠF Delete SWIERZKO, SHERRY L. NAME NAME STREET ADDRESS 331 SANDPIPER AVE STREET ADDRESS ROYAL PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TIT) F ☐ Delete SWIERZKO, KARL A NAME 331 SANDPIPER AVE STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

KARL A. SWIERZKO, PRES.

FILED