

Amended

FILED

03 JUL 25 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT # P96000104128		
1. Entity Name KERR ELECTRICAL REPAIR, INC.		
Principal Place of Business 22294 SW 62ND AVE BOCA RATON, FL 33428		Mailing Address 22294 SW 62ND AVE BOCA RATON, FL 33428
2. Principal Place of Business		3. Mailing Address
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip Country
4. FEI Number 65-0685310 ☐ CHECK HERE IF MAKING CHANGES		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent KERR, ERICK J. 22294 SW 62ND AVE BOCA RATON, FL 33428		7. Name and Address of New Registered Agent Name KERR, ERIK J. Street Address (P.O. Box Number is Not Acceptable) 22294 SW 62ND AVE. City BOCA RATON FL 33428
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 _____ (NOTE: Registered Agent's license is required when signing) DATE _____		
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		
TITLE	PD	☐ Delete
NAME	KERR, ERIK J.	
STREET ADDRESS	1221 S.E. 3RD STREET	
CITY-STATE-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	STD	☐ Delete
NAME	KERR, ELIZABETH	
STREET ADDRESS	1221 S.E. 3RD STREET	
CITY-STATE-ZIP	DEERFIELD BEACH, FL 33441	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	M	☐ Change ☒ Addition
NAME	DRIZIN, EDWARD	
STREET ADDRESS	207 PIEDMONT E.	
CITY-STATE-ZIP	DELRAY BEACH, FL 33484	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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:  ERIK KERR 07/23/03 561-929-3641		

CORRECT
SPELLING
OF REGISTERED
AGENTS NAME.

CR2EC34 (10/02)