2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 13, 2005 08:00 AM **Secretary of State DOCUMENT # P97000072705** 1. Entity Name AGC ELECTRIC, INC. Principal Place of Business Mailing Address 2660 W 79 STREET 2660 W 79 STREET US US HIALEAH, FL 33016 HIALEAH, FL 33016 01062005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0806153 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CURBELO, TOMAS V DO NOT WRITE 801 SW 172 TERRA PEMBROKE PINES, FL 33029 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PD CURBELO, TOMAS V NAME Unnonn! 79807 STREET ADDRESS 801 SW 172TH TERRACE /13/05-80033-014 158.75 CITY-ST-ZIP PEMBROKE PINES, FL 33016 VD TITLE GUZMAN, ENRIQUE I NAME 14780 SW 98TH AVE. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 SD TITLE DE LA SIERRA, PIERRETTE NAME STREET ADDRESS 2635 W. 81 STREET DO NOT WRITE CITY-ST-ZIP HIALEAH, FL 33016 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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 frue 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 trastiff 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 appears, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED