

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

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90014 035 ***150.00

DOCUMENT # **P98000020732**

1. Entity Name

Altech Electric of Central Florida Inc



DO NOT WRITE IN THIS SPACE

94027865

2. Principal Place of Business

7224 Chancery Lane

Suite, Apt. #, etc.

3. Mailing Address

7224 Chancery Lane

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32809

Country

US

Zip

32809

Country

US

4. FEI Number

59-3498137

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Robert Meier

Street Address (P.O. Box Number is Not Acceptable)

11837 Sir Winston Way

City

Orlando

FL

Zip Code

32824

**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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President.
NAME	Robert meier
STREET ADDRESS	11837 Sir Winston Way
CITY-ST-ZIP	Orlando, FL 32824
TITLE	S
NAME	Leclair, Vickie M
STREET ADDRESS	11837 Sir Winston Way
CITY-ST-ZIP	Orlando, FL 32824
TITLE	VP
NAME	Bailey, Philip D
STREET ADDRESS	1316 Golf Point Coop
CITY-ST-ZIP	Apopka, FL 32712
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Meier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/04 407-857-7879

Date

Daytime Phone #

CR2E034B (12/02)