

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P98000028788

1. Entity Name  
DIRECT ELECTRIC, INC.



Principal Place of Business  
14917 LAKE PICKETT ROAD  
ORLANDO, FL 32820

Mailing Address  
14917 LAKE PICKETT ROAD  
ORLANDO, FL 32820

**DO NOT WRITE IN THIS SPACE**

**FILED  
May 03, 2006 08:00 AM  
Secretary of State**



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3501813	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POIRIER, LAURIER A III  
14917 LAKE PICKETT ROAD  
ORLANDO, FL 32820

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME POIRIER, LAURIER A III  
STREET ADDRESS 14917 LAKE PICKETT ROAD  
CITY-ST-ZIP ORLANDO, FL 32820

TITLE S  
NAME WINDHAM, BELINDA A  
STREET ADDRESS 4020 BAYFRONT PARKWAY  
CITY-ST-ZIP ORLANDO, FL 32806

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000561270  
05/19/06-80007-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-06

Date

407-548-4446

Daytime Phone #