

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000038282

FILED
Feb 04, 2008
Secretary of State

Entity Name: CAILIS MECHANICAL CORP.

Current Principal Place of Business:

12555 ORANGE DRIVE
SUITE 105
DAVIE, FL 33330

New Principal Place of Business:

12349 SW 53 STREET
SUITE 204
COOPER CITY, FL 33330

Current Mailing Address:

12555 ORANGE DRIVE
SUITE 105
DAVIE, FL 33330

New Mailing Address:

12349 SW 53 STREET
SUITE 204
COOPER CITY, FL 33330

FEI Number: 65-0830919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAILIS, EMANUEL G
12555 ORANGE DRIVE
SUITE 105
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

CAILIS, EMANUEL G
12349 SW 53 STREET
SUITE 204
COOPER CITY, FL 33330 US

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.

SIGNATURE: EMANUEL G. CAILIS

02/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAILIS, EMANUEL G
Address: 6321 OLDE MOAT WAY
City-St-Zip: DAVIE, FL 33331

Title: S () Delete
Name: CAILIS, LINDA
Address: 6321 OLDE MOAT WAY
City-St-Zip: DAVIE, FL 33331

Title: D () Delete
Name: CAILIS, BARBARA
Address: 6721 HANCOCK ROAD
City-St-Zip: SUNSHINE RANCHES, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMANUEL G. CAILIS

P

02/04/2008

Electronic Signature of Signing Officer or Director

Date