

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90060 003 ***150.00

DOCUMENT # P98000054449

1. Entity Name
ELECTRIC 1 INCORPORATED

Principal Place of Business

1551 COPANS ROAD
 SUITE 104
 POMPANO BEACH FL 33064

Mailing Address

1551 COPANS ROAD
 SUITE 104
 POMPANO BEACH FL 33064

2. Principal Place of Business

2520 N. Powerline RD
 Suite, Apt. #, etc.
#305

3. Mailing Address

2520 N. Powerline RD
 Suite, Apt. #, etc.
#305



DO NOT WRITE IN THIS SPACE

City & State

Pompano Bch FL
 Zip
33069
 Country
US

City & State

Pompano Bch FL
 Zip
33069
 Country
US

4. FEI Number

65-0841807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUFFIN, THOMAS III
1551 COPANS ROAD
SUITE 104
POMPANO BEACH FL 33069

Name **THOMAS Ruffin III**
 Street Address (P.O. Box Number is Not Acceptable) **2520 N. Powerline RD #305**
 City **Pompano Bch FL** Zip Code **33069**

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.

SIGNATURE **Thomas Ruffin III**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **PUCCI, JAMES D**
 CITY-ST-ZIP **1551 COPANS ROAD SUITE 104**
POMPANO BEACH FL 33064

TITLE ☒ Change ☐ Addition
 NAME **2520 N. Powerline RD #305**
 STREET ADDRESS **Pompano Bch FL 33069**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **FRY, JAMES J**
 CITY-ST-ZIP **2800 N.E. 7TH STREET**
POMPANO BEACH FL 33062

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JAMES D. Pucci**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/01 **(954) 979-5655**
 Date Daytime Phone #

CR2E034 (10/00)