2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 17, 2006 08:00 AM **Secretary of State** DOCUMENT # P98000066054 BETA ELECTRIC, INC. Mailing Address Principal Place of Business 1860-SOUTHWOOD LANE 1860-SOUTHWOOD LANE CLEARWATER, FL 33764 CLEARWATER, FL 33764 CR2E034 (11/05) 03132006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3339438 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ROHANI, NAVID K 1860-SOUTHWOOD LANE CLEARWATER, FL 33764 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. (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 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ROHANI, NAVIOK NAME 1860 SOUTHWOOD LANE STREET ADDRESS CLEARWATER, FL 33764 CITY-ST-ZIP U00000471153 03/28/06-80042-013 150.00 NAME STREET ADDRESS CITY-ST-ZIC TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NUME STREET ADDRESS TITS F NAME STREET ADDRESS CITY-ST-ZIP TITLE

FILED

12. Thereby certify that the information supplied with this filling 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 the ricks empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

MANUS ROMANI 3-15-06 530-