

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000003493

1. Entity Name
ELECTRICAL CONNECTIONS BY MIKE, INC.



Principal Place of Business
**150 S.E. FOUR WINDS DRIVE
#B-206
STUART, FL 34996**

Mailing Address
**150 S.E. FOUR WINDS DRIVE
#B-206
STUART, FL 34996**



04282004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0888005

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**PETTENGILL, MICHAEL A
150 S.E. FOUR WINDS DRIVE
#B-206
STUART, FL 34996**

**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 fee if applicable (NOTE: Registered Agent signature required when renewing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

1st	D
2nd	PETTENGILL, MICHAEL A
3rd	208 SE ST. LUCIE BLVD., #101
4th	STUART, FL 34996
5th	
6th	
7th	
8th	
9th	
10th	

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STUART FL 34996 \$150.00

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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 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

Hayden (772) 283-1088
Date Daytime Phone #