

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000021640

1. Entity Name
MI-RO ELECTRIC, INC.



Principal Place of Business

**104 SW 3RD AVE
PO BOX 1265
JASPER, FL 32052**

Mailing Address

**104 SW 3RD AVE
PO BOX 1265
JASPER, FL 32052**



04172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3583800

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FOLSOM, LYNDIA M
548 CHANSBRIDGES ROAD
JASPER, FL 32052**

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	FLANAGAN, ROSE
STREET ADDRESS	PO BOX 1265
CITY- ST- ZIP	JASPER, FL 32052
TITLE	VPO
NAME	FLANAGAN, JAMES A
STREET ADDRESS	PO BOX 1265
CITY- ST- ZIP	JASPER, FL 32052
TITLE	VPD
NAME	FLANAGAN, MICHAEL
STREET ADDRESS	PO BOX 1265
CITY- ST- ZIP	JASPER, FL 32052
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE**

U00000716856
04/30/07-80023-025 150.00

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: *Rose Flanagan* **ROSE FLANAGAN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/07
Date

386-742-3823
Daytime Phone #