## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000082294**

1. Entity Name

PRO-TECH ELECTRICAL CONTRACTORS, INC.



Principal Place of Business

Mailing Address

2460 NW 17TH LANE

2460 NW 17TH LANE

SUITE 3 SUITE 3
POMPANO BEACH, FL 33064 US POMPAN

POMPANO BEACH, FL 33064 US

FILED Apr 23, 2008 08:00 AN Secretary of State



## DO NOT WRITE IN THIS SPACE

03272008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0953047 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAMOUREUX, SHAWN 2460 NW 17TH LANE SUITE 3

SIGNATURE:

POMPANO BEACH, FL. 33064

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

the obligations of registered agent.  SIGNATURE SIGNATURE (NO CHANGES)  4-7-08						
SIGNATURE.	Signature, typed or printed name of registered agent and title it	Unnnnna i 7 <b>5</b> °F 3				
				\$5.00 May Be Added to Fees	05/13/08-80048-024 158.75	
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAMOUREUX, SHAWN G 1433 NW 112TH WAY CORAL SPRINGS, FL 33071					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAWKINS, ROGER D JR 6353 BENGAL CIRCLE BOYNTON BCH, FL 33437					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/S LAMOUREUX, MICHELLE D 1433 NW 112TH WAY CORAL SPRINGS, FL 33071			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 trastee 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.						

MATURE AND TYPED OR PRINTED NAME OF BIGKING OFFICER OR DIRECTOR

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