

Filing Receipt

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## **ELECTRICITY BROKER REGISTRATION FORM**

## **PROJECT NO. 49779**

1. Check the most appropriate box to describe this submission:					
☐This is a new broker registration					
( This supplies information for a pending broker registration					
This amends an existing, completed broker registration					
Provide an explanation of the amendment:					
2. Authorized Representative or Attorney to contact about this application:					
Name Eddie Sykes			Title Owner		
Business Mailing Address 3510 Windmoor Dr					
City Katy	State Texas	<b>Z</b> ip <u>7</u>	7449		
Telephone Number 7139273080					
Email Address eds4306@yahoo.com					
3. Registering Entity: List the registering entity's legal business name, mailing address, telephone number, and email address.					
Business Name EDS Enterprises					
Mailing address 3510 Windmoor Dr					
City Katy	State Texas	Zip _	77449		
Telephone Number 7139273080					
Email Address eds4306@yahoo.com					

## **AFFIDAVIT**

My name is Eddie Sykes	I am the owner, partner, or an officer (Circle One) of the Applicant.		
registering entity. I further swear or all applicable laws and is in good stathe application are true, correct and oprovided to the Public Utility Commission understands and will comply with all	knowledge of the facts stated in the attached registration, that I am I have the authority to submit this application form on behalf of the affirm that the applicant is authorized to do business in Texas under unding with the Texas Secretary of State; that all statements made in complete; and that any material changes in such information will be ssion of Texas in a timely manner. I swear or affirm that the applicant II requirements of the applicable law and rules, including customer tirements, and marketing guidelines for retail electric service.		
	Signature of Registering Entity's Owner, Partney, or Officer		
	Eddie Sykes		
	Printed Name		
Eddie Sykes			
	Name of Registering Entity		
Sworn an	A subscribed before me this day of Units 2012.  Kimberly S. Allen My Commission Expires 05/13/2024  Notare Duble to sud-For the State of 14/25  My commission expires on 05/13/2024		

l. Business structure.	Select the form of business	iness being reg	gistered.		
☑ Sole proprietor ☐ Corporation		□ Partnership			
☐ Limited Liability Company (LLC)		☐ Limited Partnership			
listed in #3 above, und	t any trade, commercial, der which the registering st be registered with the	entity intends	siness-as (d/b/a) names, other than the legal name to operate. Any name in which a corporation ry of State.		
1 <sup>st</sup> none		2 <sup>nd</sup>	2 <sup>nd</sup>		
3 <sup>rd</sup>		4 <sup>th</sup>			
austamas carvica dan	artment. If the registerir e, title, business mailing	ig entity does i	business mailing address, and email address of the not have a dedicated customer service department, address, and telephone number of the customer		
	0540116	1,000			
Business mailing ad	dress 3510 Windmoor Dr				
City Katy		State Texas	Zip <u>77449</u>		
Telephone Number	7139273080				
Email Address eds4	306@yahoo.com				
7. Commission con	tact person. List the na mmission Staff may con	me, business natact.	nailing address, telephone number, and email address		
Name Eddie Sykes		Title Own	Title Owner		
Business mailing a	ddress				
City Katy		State Texas	Zip <u>77449</u>		
Telephone Numbe	r 7139273080				
Email Address eds					