2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000134274

1. Entity Name

F. JIMENEZ ELECTRICAL CONTRACTOR INC.



FILED Feb 25, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

12401 W OKEECHOBEE LOT 419 HIALEAH GARDENS, FL 33018-2925 12401 W OKEECHOBEE LOT 419 HIALEAH GARDENS, FL 33018-2925



DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WYYUM SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

JIMENEZ, FRANCISCO 12401 W OKEECHOBEE LOT 419 HIALEAH GARDENS, FL 33018-2925

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					
FIL	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000838091 03/05/08~80016-023 150 no
10.	OFFICERS AND DIREC	TORS		****	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD JIMENEZ, FRANCISCO 12401 W OKEECHOBEE LOT 419 HIALEAH GARDENS, FL 330182925				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JIMENEZ, NIEVES 12401 W OKEECHOBEE LOT 419 HIALEAH GARDENS, FL 330182925				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				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 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					