

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90030 040 ***150.00

DOCUMENT # 355408

1. Entity Name

JACK & GERRY'S EQUIPMENT, INC.



Principal Place of Business

1035 E PROSPECT RD.
OAKLAND PARK FL 33334

Mailing Address

1035 E PROSPECT RD.
OAKLAND PARK FL 33334



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

City & State

4. FEI Number 59-1770076

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POWERS, JOHN M.
9900 NW 6TH ST
CORAL SPGS FL 33071

Name

JOHN M POWERS JR

Street Address (P.O. Box Number is Not Acceptable)

2453 CAT CAY LANE

City

FT LAUD

FL

Zip Code

33312

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 reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME POWERS, JOHN M.
STREET ADDRESS 9900 NW 6TH ST
CITY-ST-ZIP CORAL SPGS FL

TITLE ☒ Change ☒ Addition
NAME **PRESIDENT POWERS, JR JOHN M**
STREET ADDRESS **2453 CAT CAY LANE**
CITY-ST-ZIP **FT LAUD FL 33312**

TITLE V ☒ Delete
NAME POWERS JR., JOHN M.
STREET ADDRESS 2453 CAT CAY LANE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☒ Delete
NAME POWERS, PRISCILLA
STREET ADDRESS 9900 NW 6TH ST
CITY-ST-ZIP CORAL SPGS FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Section 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 empowerments.

SIGNATURE:

JOHN M POWERS JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-08

9547740990

Date

Digitized From