

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 02, 2004 08:00 AM
Secretary of State**

DOCUMENT # J74911

1. Entity Name
JAK ELECTRIC ENTERPRISES, INC.



Principal Place of Business
**4430 20TH STREET NORTH
ST. PETERSBURG, FL 33714 US**

Mailing Address
**4430 20TH STREET NORTH
ST. PETERSBURG, FL 33714 US**



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2816373

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WINDISH, KENNETH
4430 20TH ST N
ST. PETERSBURG, FL 33714**

**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 renewing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	WINDISH, KENNETH
STREET ADDRESS	4430 20TH ST. N.
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	VPS
NAME	WINDISH, ALYCE
STREET ADDRESS	4430 20TH ST. N.
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

0000000027907
02/04/04-80004-012 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/31/04

Daytime Phone #

727-688-2134