2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J74911

1. Entity Name
JAK ELECTRIC ENTERPRISES, INC.



FILED Feb 01, 2008 08:00 AN Secretary of State

Principal Place of Business

ST. PETERSBURG, FL. 33714

4430 20TH STREET NORTH

Mailing Address

4430 20TH STREET NORTH ST. PETERSBURG, FL 33714

US



| DO | NOT | WRITE | IN THIS | SPACE |
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| | | **! | 114 11110 | UIAUL |

01042008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2816373

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

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. | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------|--|--------------------------------|---------------------------|--|--|--|
| SIGNATURESignature, typed or preted name of regulatered agent and title if approable. (NOTE: Registered Agent agriculter required when renstitting). DATE | | | | | | | | |
| regimentary special section contributes on experience approximate suppressions. (Another implemental Contribution approximate suppressions). | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | 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 | | | | U00000810955 | | | |
| NAME | | | | | 02/11/08-80007-011 150.00 | | | |
| STREET ADDRESS | WINDISH, ALYCE | | | | | | | |
| CITY-ST-ZIP | 4430 20TH ST. N. | | | | | | | |
| GHT-SI-ZIP | ST. PETERSBURG, FL | | | | | | | |
| TITLE | | | | | | | | |
| NAME | | | | | | | | |
| STREET ADDRESS | | | | DO | NOT WRITE | | | |
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| STREET ADDRESS | | | | | | | | |
| City-St-ZIP | | | | | • | | | |
| TITLE | | | | | | | | |
| NAME | | | | | | | | |
| | | | | | | | | |
| STREET ADDRESS | | | | | | | | |

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

SIGNATURE:

TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727-688-2934