2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90388 033 ***150.00

DOCUMENT # P02000028288

1. Entity Name
J & M ELECTRIC INC.

Principal Place of Business	Mailing Address
571 EAST 46TH STREET HIALEAH, FL 33013	571 EAST 46TH STREET HIALEAH, FL 33013

03072006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address	
8432 N.W. 168th Terrace		8432 N.W. 168th Terrace	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Miami Lakes, Florida		City & State: Miami Lakes, Florida	
Zip: 33016	Country: U.S.A.	Zip: 33016	Country: U.S.A.

4. FEI Number: 03-0409144 ☐ Applied For ☐ Not Applicable

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
CRUZ, JUAN 571 EAST 46TH STREET HIALEAH, FL 33013	Name: Juan Cruz Street Address (P.O. Box Number is Not Acceptable): 8432 N.W. 168th Terrace City: Miami Lakes, FL Zip Code: 33016

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 ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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 NAME STREET ADDRESS CITY-ST-ZIP	PD CRUZ, JUAN 571 EAST 46TH STREET HIALEAH, FL 33013	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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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: [signature] 04/11/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #