2007 FOR PROFIT CORPORATION FILED **ANNUAL REPORT** Feb 02, 2007 08:00 AM DOCUMENT # P02000090142 **Secretary of State** JACK'S AUTO SOUND & SECURITY, INC. Principal Place of Business Mailing Address 5021 E COLONIAL DR 5021 E COLONIAL DR ORLANDO, FL 32803 ORLANDO, FL 32803 CR2E034 (11/05) No Chg-P 01232007 DO NOT WRITE IN THIS SPACE 4. FEI Number 51-0421269 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SAMET, JACK DO NOT WRITE 2115 HAMMOCK MOSS DR ORLANDO, FL 32820 IN THIS SPACE 8. The above named entity submits this state the obligations of registered agent.

ement for the purpose of changing its	registered office or registered a	agent, or both, in the State of Florida	. I am familiar with, and accept

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	Р	
NAME	SAMET, JACK	
STREET ADDRESS	2115 HAMMOCK MOSS DR	
CITY-ST-ZIP	ORLANDO, FL 32820	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZiP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

Signature, typed or printed name of registered agent and title if applicable

U00000618517 02/08/07-80031-021 150.00

DATE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

DO NOT WRITE. IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-7IP