

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

07-11-2008 90018 027 ***150.00
P02000114585

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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000114585

1. Entity Name

JAKES ENTERPRISES OF PALM BEACH, INC.



Principal Place of Business
5032 NAUTICA LAKE CIR.
GREENACRES, FL 33463

Mailing Address
5032 NAUTICA LAKE CIR.
GREENACRES, FL 33463



07072008 No Chg-P CR2E034 (11/05)

4. FEI Number

14-1851460

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ARGUETA, JOAQUIN O
5032 NAUTICA LAKE CIR.
GREENACRES, FL 33463

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ARGUETA, JOAQUIN O
STREET ADDRESS 5032 NAUTICA LAKE CIRCLE
CITY-ST-ZIP LAKE WORTH, FL 33463

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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JAMES J. DONOVAN, CPA, PA
3046 SOUTH CONGRESS AVENUE
LAKE WORTH, FLORIDA 33461
TEL: (561) 641-9550 FAX: (561) 641-4781
(561) 965-4500 (561) 965-6789

August 26, 2008 RETURN RECEIPT REQUESTED

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Jake's Enterprises of Palm Beach, Inc.
Tin: 14-1851460
Year: 2008
Ref #: P02000114585

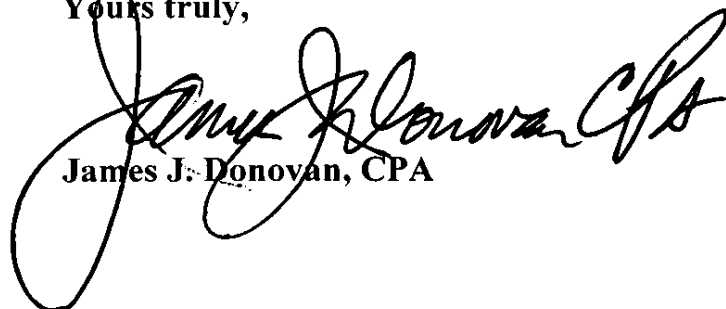
Dear Sir/Madam:

I am writing in response to your letter dated July 18, 2008 (see attached) stating the above named taxpayer owes an additional \$400 for the annual report filed for 2008. Please abate this penalty since the taxpayer did not receive prior notice.

Please review this information and send the taxpayer a corrected statement of account.

Thank you for your cooperation in this matter.

Yours truly,



James J. Donovan, CPA