



# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P03000057742</b>	
1. Entity Name JBP ELECTRIC INC.	

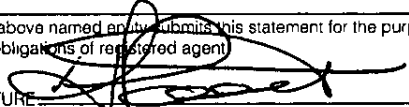
Principal Place of Business 480 WEST 84TH STREET BLDG A UNIT 103 HIALEAH, FL 33014	Mailing Address 480 WEST 84TH STREET BLDG A UNIT 103 HIALEAH, FL 33014
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01192007 No Chg-P	CR2E034 (11/05)
4. FEI Number 77-0600010	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  PONCE, JUAN B 480 WEST 84TH STREET BLDG A UNIT 103 HIALEAH, FL 33014
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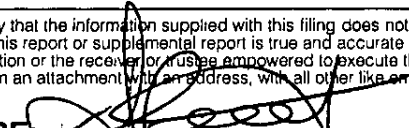
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 1/19/07
<small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000645268 03/02/07-80077-017 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD PONCE, JUAN B 2240 SW 16TH TERRACE MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PONCE, MARIA 2240 SW 16TH TERRACE MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 	DATE 01/19/07
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	