

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104784

Entity Name: J.S.E. DESIGNS, INC

FILED
Mar 15, 2004
Secretary of State

Current Principal Place of Business:

6465 142ND AVE. NORTH
L201
CLEARWATER, FL 33760 US

Current Mailing Address:

6465 142ND AVE. NORTH
L201
CLEARWATER, FL 33760 US

New Principal Place of Business:

8639 N. HIMES AVE.
3705
TAMPA, FL 33614 US

New Mailing Address:

P.O. BOX 272256
TAMPA, FL 33688 US

FEI Number: 20-0251020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHOURY, ELIE
6465 142ND AVE NORTH
L201
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

KHOURY, ELIE
8639 N. HIMES AVE
3705
TAMPA, FL 33614 US

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.

SIGNATURE: ELIE KHOURY

03/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KHOURY, ELIE E
Address: 6465 142ND AVE. NORTH # L201
City-St-Zip: CLEARWATER, FL 33760 US

Title: V () Delete
Name: KHOURY, SUZY J
Address: 6465 142 ND AVE NORTH #L201
City-St-Zip: CLEARWATER, FL 33760 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KHOURY, ELIE E
Address: 8639 N. HIMES AVE . APT. # 3705
City-St-Zip: TAMPA, FL 33614 US

Title: V (X) Change () Addition
Name: KHOURY, SUZY J
Address: 8639 N. HIMES AVE . APT. # 3705
City-St-Zip: TAMPA, FL 33614 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIE KHOURY

P

03/15/2004

Electronic Signature of Signing Officer or Director

Date