

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P94000057908

1. Entity Name
J.D. ELECTRIC, INC.



Principal Place of Business
11977 SW 56TH STREET
COOPER CITY, FL 33330

Mailing Address
11977 SW 56TH STREET
COOPER CITY, FL 33330

DO NOT WRITE IN THIS SPACE

FILED
Jan 12, 2004 08:00 AM
Secretary of State



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0507584

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIAMOND, JEFFERY A
11977 SW 56TH ST
COOPER CITY, FL 33330

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 \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
DIAMOND, JEFFREY A
11977 SW 56TH ST.
COOPER CITY, FL 33330

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ST
BETTY L. DIAMOND
11977 SW 56TH STREET
COOPER CITY, FL 33330

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DO NOT WRITE
IN THIS SPACE

000000001967
01/12/04-80033-009 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/04 954-680-8523
Date Daytime Phone #