FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000007935**1. Corporation Name

J & S ELECTRIC, INC.

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90001 015 ***150.00



Principal Place of Business Mailing Address								19919 18188 111	181 8141 1881	
4767 62ND COURT NORTH 14767 62ND COURT NORTH			Ή							
OXAHATCHEE FL 33470		LOXAMATCHEE FL 33470			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed	2 111 11110 0		·····	
						01/21/1997		•	•	
2 Dainainal D	llose of Purinees	2a. Mailing Address				4. FEI Number		Apr	olied For	
2. Principal Place of Business		26				65-0724871		Not	Applicable	
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			,			\$8.75 A	dditional	
22			27			5. Certificate of Status Desired		Fee Rec	quired	ييند
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be	l	
23		28			Trust Fund Contribution		Added to	Fees	l	
Zip Country		Zip Country				8. This corporation owes the current year Intangible				
4 25		29	30			Personal Property Tax.				
	9. Name and Address of Curren	t Registered Agent		04 21		10. Name and Address of New R	egistered A	gent		l
MODA	ONOLICH MICHAEL D	•		81 N	ame					ì
	Onough, Michael D B Forest Hill BLVD.				Street Address (P.O. Box Number is Not Acceptable)					l
						71	रिक्ष अस्ति स	21 (10)	<u> </u>	
SUITE 201A WELLINGTON FL 33414				83		· · · · · · · · · · · · · · · · · · ·				l
WLL	3110101112 00414			84 Ci	ity		FI	85 Zip C	ode	
	to the provisions of Sections 607.050	0 1 007 4500 Florida Stat	uton the o	bovo pa	mod corn	pration submits this statement for the	numose of o	hanging its	registered	
office or	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was	autnonzeo	1 DV the	corporatio	n's board of directors. I hereby accep	t the appoint	ment as reg	gistered	
SIGNATURE					ů.		B. #5		 .	١.
	Signature, typed or printed name of registered age			Agent sign	nature required	ADDITIONS/CHANGES TO OFF	DATE .	DIRECTO	RS IN 12	3
12.	OFFICERS AN	ID DIRECTORS	13.	n c		ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition	1
TITLE	P	☐ DECE15	1.1 11							
NAME	VASALLO, JERRY		1.2 N							8
STREET ADDRESS				TREET ADD						5
CITY-ST-ZIP	LOXAHATCHEE FL 33470	☐ DELETE		TY-ST-ZIP				Change	Addition	8
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NAME	HUBERTZ, STEPHEN		2.2 N			·				
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CITY-ST-ZIP	WELLINGTON L3 33414	C per err		:ITY-ST-ZIF	P			Change	Addition	ł
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NAME	VASALLO, JERRY		3.2 N							
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NAME	HUBERTZ, STEPHEN		4.21							
STREET ADDRESS	14995 HORSESHOE TRACE			TREET ADD						
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NAME				TREET ADÛ	DRESS					
STREET ADDRESS	5			TY-ST-ZIF						
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NAME				TREET ADO	DRESS					
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 faceiver or trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with the information indicated on this annual report or supplemental and a supplementation indicated on this annual report or supplemental and a supplementation of the corporation or the faceiver or trastee empowered the supplementation of the corporation of the corporation of the corporation or the faceiver or trastee empowered.