

DOCUMENT # P97000007935
1. Entity Name
J & S ELECTRIC, INC.

Principal Place of Business Mailing Address
14767 62ND COURT NORTH 14767 62ND COURT NORTH
LOXAHATCHEE FL 33470 LOXAHATCHEE FL 33470

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent
MCDONOUGH, MICHAEL D
12798 FOREST HILL BLVD.
SUITE 201A
WELLINGTON FL 33414

4. FEI Number **65-0724871** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
Name **JERRY VASALLO, PRESIDENT**
Street Address (P.O. Box Number is Not Acceptable)
14767 62ND COURT NORTH
City **LOXAHATCHEE** FL Zip Code **33470**

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.

SIGNATURE *Jerry Vasallo* *Jerry Vasallo, President* *1-4-01*
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back) **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VASALLO, JERRY	NAME	
STREET ADDRESS	14767 62ND COURT NORTH	STREET ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL 33470	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUBERTZ, STEPHEN	NAME	
STREET ADDRESS	14995 HORSESHOE TRACE	STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON L3 33414	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VASALLO, JERRY	NAME	
STREET ADDRESS	14767 62ND COURT NORTH	STREET ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL 33470	CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUBERTZ, STEPHEN	NAME	
STREET ADDRESS	14995 HORSESHOE TRACE	STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON FL 33414	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jerry Vasallo* *JERRY VASALLO, President* *1-4-01*
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Jan 09, 2001 8:00 am
Secretary of State

01-09-2001 90035 004 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)