


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000083302**  
 1. Entity Name  
**JESUS AUTO SOUND & ALARM SYSTEMS, INC.**



Principal Place of Business: **2020 SW 61ST AVENUE MIAMI, FL 33155**  
 Mailing Address: **2020 SW 61ST AVENUE MIAMI, FL 33155**

**DO NOT WRITE IN THIS SPACE**



04272005 No Chg-P CR2E034 (10/03)

4. FEI Number: **65-0865343** Applied For:  Not Applicable:   
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**OYARCE, JORGE E**  
**%JE OYARCE & ASSOCIATES, ACCOUNTING OFF.**  
**199 SW 12TH AVENUE, STE. 11**  
**MIAMI, FL 33130-1056**

**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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GUTIERREZ, SALVADOR J
STREET ADDRESS	2020 SW 61ST AVENUE
CITY - ST - ZIP	MIAMI, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 05/05/05-80011-012 150.00

**DO NOT WRITE IN THIS SPACE**

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 affidavit with all other like empowered.

SIGNATURE: *[Signature]* 4/27/05 305-302-6669  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #