


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2004 08:00 AM
Secretary of State

DOCUMENT # V02570
 1. Entity Name
JACK HARVEY'S IMPORTS, INC.



Principal Place of Business 1301 WEST DETROIT BLVD. PENSACOLA, FL 32534	Mailing Address 1301 WEST DETROIT BLVD. PENSACOLA, FL 32534
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07302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3099417	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HARVEY, CAROL K.
 1301 WEST DETROIT BLVD.
 PENSACOLA, FL 32534

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 _____ DATE _____
Signature typed or printed name of registered agent and file if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HARVEY, CAROL K. 8351 RANGER DRIVE PENSACOLA, FL
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 08/02/04-80007-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: Carol K. Harvey **Carol K Harvey** 7-30-04 850-484-7660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #