## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000148834

Entity Name: JJJK ENTERPRISES, INC.

FILED Mar 20, 2008 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
8263 C CAUSEWAY BLVD TAMPA, FL 33619			8263 CAUSEWAY SUITE C TAMPA, FL 33619		
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
8263 C CAUSEWAY BLVD TAMPA, FL 33619			8263 CAUSEWAY BLVD SUITE C TAMPA, FL 33619		
FEI Number	: 56-2487908	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address	s of New Registered Agent:	
MIAMI, FL The above in the State	33145 US e named entity e of Florida.	STREET, 4TH FLOOR submits this statement for the	purpose of changing its registe	ered office or registered agent, or both,	
SIGNATUI		. 0. 1			
		nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VIJIL, JAMES F	CROSS COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP ( KEKOOLANI, J 10023 REMING RIVERVIEW, F	STON DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS ( KEKOOLANI, J 10023 REMINO RIVERVIEW, F	STON DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VIJIL, KAREN	CROSS COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL KEKOOLANI DP 03/20/2008