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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 31 1997 8:00am Secretary of State

DOCUMENT # P92000010152 (6) JKS INDUSTRIES, INC. Principal Place of Business Mailing Address 1645 ELK SPRING DRIVE 1845 ELKSPRING DR										
BRANDON FL 33511 US		В	BRANDON FL 33511-1718 US			Date Incorporated or Qualified 3a. Date of Last Report				
				···		12/07/1992		04/	12/1996	
·	lace of Business	 	Mailing Address			4. FEI Number 59-3152856			f	plied For Applicable
Suite, Apt	#, etc.	26]	Suite, Apt. #, etc.			6. Certificate of Status I	Desired	<u> </u>	\$8.75	
2		27	0	·			<u></u>)CM	Fee Re	
City & State	0	28	City & State			6. Election Campaign Fi	_		\$5.00 Added t	
Zip	Country		Zip	Count	lry	8. This corporation has				
4	25 9. Name and Address of C	29		30		Florida Statutes		Yes [
eui		orrein negis	telen Yöelit	8	1 Name	10. Name and Address	DI MAM LIA	Jisterso /	чбенг	
SHIN DAE K 1645 ELK SPRING DR BRANDON FL 33511					2 Street Ac	ddress (P.O. Box Number is No	ot Accentah	le)	 	
					JOI BSS (F.O. BOX NUMBER IS INC	ot Acceptab	10)			
				8	3					
				8	4 City		·	P	85 Zip (Code
				۲	City					
11. Pursuant	to the provisions of Sections 60	7.0502 and 6	07.1508, Florida Sta	1		orporation submits this stateme	ent for the p	FL urpose of	changing it	s registered
11. Pursuant office or ragent La	to the provisions of Sections 60 egistered agent, or both, in the ringaminar with, and accept the	07.0502 and 6 State of Flori obligations o	07.1508, Florida Sta da. Such change wa f, Section 607.0505,	1		orporation submits this statemeration's board of directors. I he	ent for the pareby accep		changing it ointment as	s registered registered
11. Pursuant office or r agent Ta SIGNATURE	DAE K. Shi	N .		tutes, the abo s authorized Florida Statut	ove-named or by the corpo tes.		ent for the pareby accep		changing it ointment as	s registered registered 7
	DAE K. SU	N .	if applicable (N	tutes, the abo s authorized Florida Statut	ove-named or by the corpo tes.	orporation submits this stateme ration's board of directors. I he squired when reinstating) ADDITIONS/CHANGES		urpose of the app	5-9-	7
SIGNATURE	DAE K. S.L. Signalian hypodox pratec name of register OFFICER D	ored agent and title	if applicable (N	tutes, the abo s authorized Florida Statut	ove-named or by the corpo tes.	quited when reinstating) ADDITIONS/CHANGES		urpose of the app	5-9-	7
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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 receiver or trustee 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 on an attachment with an address.