FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secret ary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000107546

1. Corporation Name

FJK-TEE JAY, INC.

Principal Place of Business

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

712 U.S. HIGHWAY ONE NORTH-FALM BEACH FL 33408 240 Royal Paken Way Paken Picture of Business 712 U.S. HIGHWAY ONE NORTH-FALM BEACH FL 33408 712 U.S. HIGHWAY ONE NORTH-FALM BEACH FL 33408					DO NOT WRITE IN THIS SPACE			
Palm Beach Pi 73480					3. Date Incorporated or Qualifed 12/29/1998			
	lace of Business	2a. Mailing	Address		4. FEI Number 65-0885584			priled For lot Applicable
Suite, Act.	# etc	26 Suite A	Apt. #, etc.					Additional
22	<i>",</i> 0.0.	27			5. Certifcate of Status Des	ired 🔲	· · · · ·	Rec uired
City & State City & State			State		6. Election Campaign Fina	ncing	\$5.00	May Be
23		28			Trust F und Contribution		Added	Itc Fees
Zip	Cour try	Zip	_	Country	8. This corporation owes the	ne current year in		` X .
24	25	29	30	<u> </u>	Persor at Property Tax.	New Penistered	☐ Yes	Z:140
9. Name and Address of Current Registered Agent COHEN, FRED C 712 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33408 240 North Palm Beach F. 3400 B								
				5480		FL	_	a radiotored
11. Pursuant to the provisions of St ctions 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered eigent, or be h, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0509 Florida Statutes.								
SIGNATURE	Signature, typed or printed na ne of registere	age and title if applicable	- 11AT_	gistered Agent signature requ		DATE	/	
12.		AND DIRECTORS	<u> </u>	13.	ADDITIONS/CHANGES	TO OFFICERS A	ND DIRECT	OF:S IN 12
TITLE	PD		DELETE	1.1 TITLE			☐ Change	Addition
NAME	Frederick J. Keit			12 NAME				
STREET ADDRESS	240 Roayl Palm Wa	у		1.3 STREET ADDRESS				
CITY-ST-ZIP	Palm Beach, FL 33	480		1.4 CITY-ST-ZIP				
TITLE	VP/S/T/D		☐ DELETE	2.1 TITLE			Change	Addition
NAME	Thomas B. D'Agost	ino		2.2 NAME				
STREET ADDRESS	c/o Kaufman & Can Norfolk, VA 23514	oles,P.O.Bo	ox 3037	2.3 STREET ADDRESS				1
CITY-ST-ZIP	Nortolk, VA 23514	·	□ DELETE	2.4 CITY-ST-ZIP			☐ Change	Addition
TITLE			□ pereis	3.1 TITLE			- Outride	
NAME				3.2 NAME 3.3 STREET ADDRESS				
STREET ADDRE 3S				3.4. CITY-ST-ZIP				
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE			Change	Addition
NAME				4, 2 NAME			_	
STREET ADDRESS				4.3 STREET ADDRESS				·
CITY-ST-ZIP				4.4 CITY-ST-ZIP				
TITLE			DELETE	5.1 TITLE			Change	e ☐ Addition
NAME				52 NAME				
STREET ADDRE IS				5.3 STREET ADDRESS				
CITY-ST-ZIP				5.4 CITY-ST-ZIP				
TITLE			DELETE	6.1 TILE	<u> </u>		Change	Addition
NAME	1			6.2 NAME				

63 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 with a Tother like empowered.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90154 025 ***150.00