2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 15, 2000 8:00 am Secretary of State DOCUMENT # 381815 1. Entity Name J.K.H., INC. 03-15-2000 90118 045 ***150.00 Mailing Address Principal Place of Business 700 N.W. 57TH COURT 700 N.W. 57TH COURT FT. LAUDERDALE FL 33309-2028 FT. LAUDERDALE FL 33309 A0030006 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City'& State 4. FEI Number 59-1346977 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JOHN K. HEILIG JR. HEILIG, JOHN K. Street Address (P.O. Box Number is Not Acceptable) 5201 N.E. 28th AVE. 2100 S. OCEAN LANE APARTMENT 707 FT. LAUDERDALE FL 33316 City Zip Code 33308 FT. LAUDERDALE 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 Heilia SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. <u></u> Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE PD De'ete TITLE Change **HEILIG.JOHN** NAME NAME STREET ADDRESS STREET ADDRESS 2100 S. OCEAN LANE CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete Change ☐ Addition TITLE TITLE HEILIG, MARIAN S. NAME NAME STREET ADDRESS STREET ADDRESS 2100 S. OCEAN LANE CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL ☐ Change Addition TITLE TITLE □ Delete LUTGERT, BEVERLY NAME NAME STREET ADDRESS STREET ADDRESS 4100 GULF SHORE BLVD CITY-ST-ZIP CITY-ST-ZIP NAPLES FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE HEILIG, JOHN K JR NAME NAME STREET ADDRESS 5201 NE 28TH AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Heilig Jr. 3/13/00

954.712-8770

Daytime Phone #