

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthagen  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 MAR 26 PM 4:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 441123 (7)  
1. Corporation Name  
K-B-J, INC.

Principal Place of Business  
1206 N. E. 3RD AVENUE  
DELRAY BEACH FL 33444-4006

Mailing Address  
1206 N. E. 3RD AVENUE  
DELRAY BEACH FL 33444-4006



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/04/1973	
21		26		4. FEI Number 59-1524390	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		29			
9. Name and Address of Current Registered Agent CALLAWAY, JAY P 1206 NE 3RD AVENUE DELRAY BEACH FL 33444				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 607.0505, Florida Statutes.					

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALLAWAY (JAY P.)	1.2 NAME	
STREET ADDRESS	1206 NE 3RD AVENUE	1.3 STREET ADDRESS	300002477063--5
CITY-ST-ZIP	DELRAY BEACH FL	1.4 CITY-ST-ZIP	-04/02/98--01075--026
TITLE	ST	2.1 TITLE	*****8.75 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAN NESS (BARBARA L.)	2.2 NAME	
STREET ADDRESS	9191 WHIPPERWILL PASS	2.3 STREET ADDRESS	300002477063--5
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	-04/02/98--01075--027
TITLE	V	3.1 TITLE	***150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALLAWAY, JAY MAJOR	3.2 NAME	
STREET ADDRESS	508 N. COUNTRY CLUB DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTIS FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE:

*[Signature]*

3/19/98/511793/2215

CR2E034 (10/97)