## 2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # F36722** May 01, 2000 8:00 am Secretary of State JK CONSTRUCTION GROUP, INC. 05-01-2000 90486 037 \*\*\*150.00 Principal Place of Business Mailing Address 601 N ORLANDO P O BOX 948238 MAITLAND FL 32794-8238 STE 113 MAITLAND FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2096300 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent IESTERER, RIESTERER, JOANNE M. O. Box Number is Not Acceptable) 601 N ORLANDO AVE STE 113 MAITLAND FL 32751 City submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above KIESTERER 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. Added to Fees П (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F ☐ Change ☐ Addition ■ Delete TITLE RIESTERER, JOANNE M NAME NAME STREET ADDRESS 601 N ORLANDO AVE STE 113 STREET ADDRESS CITY-ST-ZIP MAITLAND FL 32751 CITY-ST-ZIP PRESIDENT Change ☐ Addition ☐ Delete TITLE RIESTERER, KARL F. JR RIESTERER, KARL F. JR. NAME GOIN ORLANDO AVE STE 113 601 N ORLANDO AVE STE 113 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAITLAND FL 32751 CITY-ST-ZIP ☐ Change ~ Addition ☐ Delete TITLE JOENLEN RIESTERER. NAME GOI NORLANDO AVE STE 113 STREET ADDRESS STREET ADDRESS MAITLAND, FL 32751 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE Change

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 refered activates 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

KIESTERER 4/24/00