**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

PROFIT CORPORATION ANNUAL REPORT

**1996**

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

DOCUMENT # **G54600** **(3)**

1. Corporation Name

**J K ENTERPRISES OF DEERFIELD BEACH, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 6500 N W 15 AVE STE 100<br>FT. LAUDERDALE. FL.<br>FT. LAUDERDALE FL 33309 | 6500 N W 15 AVE STE 100<br>FT. LAUDERDALE. FL.<br>FT. LAUDERDALE FL 33309 |

3. Date Incorporated or Qualified: **08/17/1983**

3a. Date of Last Report: **07/26/1995**

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 2424 N. Federal Highway | 26 2424 N. Federal Highway |
| Suite, Apt. #, etc<br>22 Suite 362 | Suite, Apt. #, etc.<br>27 Suite 362 |
| City & State<br>23 Boca Raton, FL | City & State<br>28 Boca Raton, FL |
| Zip / Country<br>24 33431 / 25 U. S. | Zip / Country<br>29 33431 / 30 U. S. |

4. FEI Number: **59-2336414** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BURGER, ALAN M. ESQ PA**
**9990 SW 77TH AVE.**
**PENTHOUSE 5**
**MIAMI FL 33156**

10. Name and Address of New Registered Agent

81 Name: Kathryn Dillon
82 Street Address (P.O. Box Number is Not Acceptable): 2424 N. Federal Highway
83 Suite 362
84 City: Boca Raton **FL** 85 Zip Code: 33431

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: Kathryn Dillon KATHRYN DILLON 06/10/96
Signature, typed or printed name of registered agent and date of signature (NOTE: Registered Agent signature required for reinstatement) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | DP | ☒ DELETE | 11 TITLE | CD | ☐ Change ☒ Addition |
| NAME | KAPLAN, JAN | | 12 NAME | James R. Cook | |
| STREET ADDRESS | 6500 N.W. 15TH AVE. | | 13 STREET ADDRESS | 2424 N. Federal Highway Suite 362 | |
| CITY-ST-ZIP | FT. LAUDERDALE FL | | 14 CITY-ST-ZIP | Boca Raton, FL 33431 | |
| TITLE | D | ☒ DELETE | 21 TITLE | DV | ☐ Change ☒ Addition |
| NAME | KAPLAN, KAREN | | 22 NAME | Peter Molinaro, Jr. | |
| STREET ADDRESS | 6500 N.W. 15TH AVE. | | 23 STREET ADDRESS | 2424 N. Federal Highway Suite 362 | |
| CITY-ST-ZIP | FT. LAUDERDALE FL | | 24 CITY-ST-ZIP | Boca Raton, FL 33431 | |
| TITLE | | ☐ DELETE | 31 TITLE | DV | ☐ Change ☒ Addition |
| NAME | | | 32 NAME | Vincent C. Manopoli | |
| STREET ADDRESS | | | 33 STREET ADDRESS | 2424 N. Federal Highway Suite 362 | |
| CITY-ST-ZIP | | | 34 CITY-ST-ZIP | Boca Raton, FL 33431 | |
| TITLE | | ☐ DELETE | 41 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 42 NAME | | |
| STREET ADDRESS | | | 43 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 44 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 51 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 52 NAME | | |
| STREET ADDRESS | | | 53 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 54 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 62 NAME | | |
| STREET ADDRESS | | | 63 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 64 CITY-ST-ZIP | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:** Peter Molinaro Jr. 6/10/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)