

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**  
03-12-2001 90031 047 \*\*\*150.00

<b>DOCUMENT # K06346</b> 1. Entity Name <b>JK HOLDING CORPORATION</b>																															
Principal Place of Business <b>2790 SUNSET POINT ROAD</b> <b>CLEARWATER FL 33765</b> <b>US</b>		Mailing Address <b>2790 SUNSET POINT ROAD</b> <b>CLEARWATER FL 33758</b> <b>US</b>																													
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																													
City & State		City & State																													
Zip	Country	Zip	Country																												
6. Name and Address of Current Registered Agent  <b>SHEAR, ROBERT L PA</b> <b>2790 SUNSET POINT ROAD</b> <b>CLEARWATER FL 33759</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code																													
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.																															
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																															
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> <small>(See criteria on back)</small>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>																													
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">11. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 25%; padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="width: 75%; padding: 5px;"> <input type="checkbox"/> Delete  <b>D</b>  <b>HAUSER, MICHAEL L.</b>  <b>2790 SUNSET POINT ROAD</b>  <b>CLEARWATER FL 33765</b> </td> <td style="width: 25%; padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="width: 75%; padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td style="padding: 5px;">           TITLE NAME STREET ADDRESS CITY-ST-ZIP         </td> <td style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> </table>				11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>D</b> <b>HAUSER, MICHAEL L.</b> <b>2790 SUNSET POINT ROAD</b> <b>CLEARWATER FL 33765</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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.																															
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>M.L. Hauser, Dir. 2/21/2001 727-723-2110</b> <small>Date Daytime Phone #</small>																													



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)