

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K35165

1. Corporation Name

JK's Screen Builders Factory Inc.

Principal Place of Business

Flea World
HWY. 19-92 #B25
SANford, FL 32773

Mailing Address

P.O. Box 950641
LAke Mary, FL
32795

2. Principal Place of Business

21. Flea World
Suite, Apt. #, etc.
22. HWY 19-92 #B.25
City & State
23. SANford, FL
Zip
24. 32773

2a. Mailing Address

26. P.O. Box 950641
Suite, Apt. #, etc.
27. LAke Mary, FL
City & State
28. 32795
Zip
29. Seminole
Country

3. Date Incorporated or Qualified

3a. Date of Last Report

4. FEI Number

59-2913329

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

JANice Silvia
4535 Bedford Rd,
SANford, FL 32773

10. Name and Address of New Registered Agent

81. Name

SAME

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)

7-20-97

DATE

12. OFFICERS AND DIRECTORS

TITLE Pres. ☐ DELETE
NAME JANice Silvia
STREET ADDRESS 4535 Bedford Rd,
CITY-ST-ZIP SANford FL 32773
TITLE V.P. ☐ DELETE
NAME Kari Karku
STREET ADDRESS 4492 Bedford Rd,
CITY-ST-ZIP SANford FL 32773
TITLE Sec. ☐ DELETE
NAME JANice Silvia
STREET ADDRESS 4535 Bedford Rd,
CITY-ST-ZIP SANford FL 32773
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME SAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME SAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME SAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE 100002250941
4.2 NAME -07/29/97-01084-010
4.3 STREET ADDRESS *****550.00 *****550.00
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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:

JANice Silvia JANice Silvia 7-20-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Print name (three times)

CR2E034 (9/96)