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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 **DOCUMENT # K38552**

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90231 022 \*\*\*150.00

JUK IND	iustries, inc.								
Principal Place	e of Rusiness	Mailing Address					INI BILLU HUL OLAH I		i Bit Biti Aibit Indi
•		6515 SOUTHERN BLVD.			- 1		-		
6515 SOUTHERN BLVD. 6515 SOUTHERN BLVD. WEST PALM BEACH FL 33413 WEST PALM BEACH FL 3341			413						
THEST FACING DEPOSITE SERVICE						DO NOT WRITE IN THIS SPACE			
					3.	Date incorporated or Quali	fed		
						10/13/1988			
2. Principal Pl	lace of Business	2a. Mailing Address			4.	FEI Number		$\vdash$	Applied For
21		26				65-0088732			Not Applicable
Suite, Apt.	#petc.	- Suite, Apt. #, etc.	\$		5.	Certificate of Status Desired	a 🗆		5 Additional - Required
22		City & State				Election Committee Electric	<del></del>		
City & State	e	<b>⊢</b> '			6.	Election Campaign Financi Trust Fund Contribution	ing 🗆		00 May Be led to Fees
23 Zin	Country	Zip	Cour	trv		This corporation owes the	current year Int		
Zip	25	29	30	,	0.	Personal Property Tax.	canent year in	Yes	□No
24	9. Name and Address of Current	<u> </u>	301		10.	Name and Address of Ne	w Registered	Agent	
· <u>·</u> ·	3. Italiic die Additos di Golisti			81 Name	)	•			
KAR	ON, MARC		ļ	20 0		O. Day North and Alas Ass	antable)		
6515	SOUTHERN BLVD.			B2 Street	(Address (P	O. Box Number is Not Acc	eptable)		
WES	ST PALM BEACH FL 33413		ľ	83					
	•		L					·	7-0-4
				84 City			FL	85	Zip Code
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statut	es, the ab	ove-named	corporation	n submits this statement for	the purpose of	changing	g its registered
office or r	to the provisions of Sections 607,0502 registered agent, or both, in the State or	f Florida. Such change was a	uthorized	by the cort	d corporation poration's bo	n submits this statement for pard of directors. I hereby a	the purpose of ccept the appoi	changing intment a	g its registered is registered
office or r agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o im familiar with, and accept the obligation	f Florida. Such change was a	uthorized	by the cort	d corporation poration's bo	n submits this statement for pard of directors. I hereby a	the purpose of ccept the appoi	changing intment a	g its registered is registered
office or r	poistered agent, or both, in the State of	f Florida. Such change was a ons of, Section 607.0505, Flo	utnorized rida Statu	by the corp tes.	d corporation coration's bo	oard of directors. I hereby a	the purpose of ccept the appoi	changing intment a	g its registered s registered
office or r agent. I a	registered agent, or both, in the State o im familiar with, and accept the obligation	Florida. Such change was a ons of, Section 607.0505, Floring title if applicable. (NOTE	utnorized rida Statu	by the corp tes.	required when n	oard of directors. I hereby a	. DATE	ND DIRE	CTORS IN 12
office or n agent. I a SIGNATURE	registered agent, or both, in the State or in familiar with, and accept the obligation of the state of registered agent.	Florida. Such change was a ons of, Section 607.0505, Floring title if applicable. (NOTE	uthorized rida Statu : Registered /	by the corples.	required when n	reinstating)  ADDITIONS/CHANGES TO	. DATE		CTORS IN 12
office or nagent. I a SIGNATURE 12.	registered agent, or both, in the State or in familiar with, and accept the obligation of the state of the st	Florida. Such change was a ons of, Section 607.0505, Floring and title if applicable. (NOTE DIRECTORS	rida Statu  Registered /	by the corples.  gent signature	required when n	reinstating)  ADDITIONS/CHANGES TO	DATE OFFICERS AN	ND DIRE	CTORS IN 12
office or ragent. I a SIGNATURE  12.	egistered agent, or both, in the State o m familiar with, and accept the obligation of segistered agent OFFICER'S AND DP KARON, MARC A. 6515 SOUTHERN BLVD.	Florida. Such change was a ons of, Section 607.0505, Floring and title if applicable. (NOTE DIRECTORS	Registered A	by the corples.  gent signature	required when n	emstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B	DATE OFFICERS AN	ND DIRECTOR	CTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME	egistered agent, or both, in the State o m familiar with, and accept the obligation of signature, typed or printed name of registered agent OFFICERS AND DP KARON, MARC A.	Florida. Such change was a ons of, Section 607.0505, Floring and title if applicable. (NOTE DIRECTORS	Registered / 13. 1.1 TITI 1.2 NAI 1.3 STF	by the corples.  gent signature  E	required when n	reinstating)  ADDITIONS/CHANGES TO	DATE OFFICERS AN	ND DIRECTOR	CTORS IN 12
office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS	egistered agent, or both, in the State o m familiar with, and accept the obligation of segistered agent OFFICER'S AND DP KARON, MARC A. 6515 SOUTHERN BLVD.	Florida. Such change was a ons of, Section 607.0505, Floring and title if applicable. (NOTE DIRECTORS	Registered / 13. 1.1 TITI 1.2 NAI 1.3 STF	by the corp tes.  Gent signatura  E  AE  WEET ADDRESS Y-ST-ZIP	PARCE SSIS	emstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  PALM BEACH	DATE OFFICERS AN	ND DIRECTOR	CTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State o m familiar with, and accept the obligation of segistered agent OFFICER'S AND DP KARON, MARC A. 6515 SOUTHERN BLVD.	if Florida. Such change was a cons of, Section 607.0505, Floring in the first special in the constraint of the constrain	Registered A  13. 1.1 TITI 1.2 NAI 1.3 STF	Dy the correctes.  Gent signature  E  ME  TEST ADDRESS  Y-ST-ZIP  E	P MARC	reinstating)  ADDITIONS/CHANGES TO  A KARON  SOUTHERN BEACH	DATE OFFICERS AN	ND DIRECTOR	CTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	if Florida. Such change was a cons of, Section 607.0505, Floring in the first special in the constraint of the constrain	Registered / 13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	Dy the correctes.  Gent signature  E  ME  TEST ADDRESS  Y-ST-ZIP  E	PARCE SIS	reinstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  S SOUTHERN B	DATE OFFICERS AND OLVO The State of the Stat	ND DIRECTOR	CTORS IN 12
office or nagent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a ons of, Section 607.0505, Floring of title if applicable. (NOTE)  DIRECTORS  DELETE	Registered / 13. 1.1 IIII 12 NAI 1.3 STF 1.4 CIT 2.1 TIII 22 NAI 23 STF	gent signature  E  ME  ET ADORESS  Y-ST-ZIP  E	P MARCE WEST V ADA NO GSIS	reinstating)  ADDITIONS/CHANGES TO  A KARON  SOUTHERN BEACH	DATE OFFICERS AND OLVO The State of the Stat	ND DIRE	CTORS IN 12 nge
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME street ADDRESS	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	if Florida. Such change was a cons of, Section 607.0505, Floring in the first special in the constraint of the constrain	Registered / 13. 1.1 IIII 12 NAI 1.3 STF 1.4 CIT 2.1 TIII 22 NAI 23 STF	Dy the corries.  E  AE  EEET ADDRESS  Y-ST-ZIP  AE  EEET ADDRESS  Y-ST-ZIP	P MARCE WEST V ADA CONTROL OF STATE OF	emstering)  ADDITIONS/CHANGES TO  A KARON  SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN E  T PALM BEACH	DATE OFFICERS AND OLVO The State of the Stat	ND DIRE	CTORS IN 12  nge
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME sTREET ADDRESS CITY-ST-ZIP CONTY-ST-ZIP CONTY-ST-ZIP CONTY-ST-ZIP	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a ons of, Section 607.0505, Floring of title if applicable. (NOTE)  DIRECTORS  DELETE	Registered /   13.	Dy the corries.  Gent signature  E  ME  EEET ADDRESS  Y-ST-ZIP  EEET ADDRESS Y-ST-ZIP  EEET ADDRESS Y-ST-ZIP	P MARC 6515 WEST V D MEST V D MARC MEST WEST MEST MEST MEST MEST MEST MEST MEST M	Temstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN B  T PALM BEACH  M KARON  M CANDELL	DATE OFFICERS AN OLVO FLA 35 3LVO	ND DIRE	CTORS IN 12 nge
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME sTREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a ons of, Section 607.0505, Floring of title if applicable. (NOTE)  DIRECTORS  DELETE	Registered /   13.	Dy the corries.  Gent signature  E  ME  EEET ADDRESS  Y-ST-ZIP  EEET ADDRESS Y-ST-ZIP  EEET ADDRESS Y-ST-ZIP	P MARC 6515 WEST V D MEST V D MARC MEST WEST MEST MEST MEST MEST MEST MEST MEST M	reinstating)  ADDITIONS/CHANGES TO  A KARON  SOUTHERN B  PALM BEACH  KARON  SOUTHERN E  PALM BEACH  MARON  SOUTHERN E  MCCONNEll  SOUTHERN	DATE OFFICERS AN  LVO  LVO  LVO  LVO  BLVO	ND DIRE	CTORS IN 12 nge
office or nagent. I a SIGNATURE  12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME sTREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME NAME	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida and title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D MAC 6515 WEST WEST WEST WEST WEST WEST WEST WEST	remstering)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  T PALM BEACH  M KARON  T PALM BEACH  M CONNELL  MC CONNELL  SOUTHERN  SOUTHERN	DATE OFFICERS AN  LVO  LVO  LVO  LVO  BLVO	ND DIRECTOR	CTORS IN 12 Inge Addition Inge Addition
office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a ons of, Section 607.0505, Floring of title if applicable. (NOTE)  DIRECTORS  DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC GSIS WEST V D MAC GSIS WEST V D MAC GSIS V SIS V D MAC GSIS V SIS V	reinsteuring)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  T PALM BEACH  MC CONNELL  SOUTHERN  SOUTHERN  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  LVO  LVO  LVO  LVO  BLVO	ND DIRE	CTORS IN 12 Inge Addition Inge Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida and title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARCE GSIS WEST V D MACE GSIS WEST V D MACE MACE MEST V	T PALM BEACH  Mc Connell  SOUTHERN  FORM BEACH  MC CONNELL  SOUTHERN  FORM BEACH  MC CONNELL  SOUTHERN  MC CONNELL  MC CONNELL	DATE OFFICERS AND OLVO A FLA 31 BLVO CH, FLA	ND DIRECTOR	CTORS IN 12 Inge Addition Inge Addition
office or nagent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida and title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D MAC 6515 WEST V D MAC 6515 V COUNTS 6515	TEMPORAL PALM BEACH  MCCONNELL  M	DATE OFFICERS AN  OLVO FLA SEVO BLVO CH, FLA	ND DIRECTOR	CTORS IN 12 Inge Addition Inge Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC GSIS WEST V D MAC GSIS WEST V D MAC GSIS WEST WEST WEST WEST WEST WEST WEST	reinsteuring)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  T PALM BEACH  MC CONNELL  SOUTHERN  SOUTHERN  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA SEVO BLVO CH, FLA	ND DIRECTOR	CTORS IN 12  nge
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida and title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC GSIS WEST V D MAC GSIS WEST V S WEST V S	remstering)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  MC CONNELL  SOUTHERN  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA SEVO BLVO CH, FLA	ND DIRECTOR	CTORS IN 12  nge
office or nagent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E AE EET ADDRESS Y-ST-ZIP E AE	P MARC 6515 WEST V D MAC 6515 W D	Temstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN B  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA 35 BLVO CH, FLA	ND DIRECTOR	CTORS IN 12  nge
office or nagent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D MAC 6515 W D	Temstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN B  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA 35 BLVO CH, FLA	ND DIRE Char  3413 Char  334  Char  334  Char  334	CTORS IN 12  nge
office or nagent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State o m familiar with, and accept the obligation of support of the state of m familiar with, and accept the obligation of support of the support of support of the support of	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELET	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D MAC 6515 W D	remstering)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  MC CONNELL  SOUTHERN  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA 35 BLVO CH, FLA	334 GChar 334 GChar 334 GChar 334 GChar	CTORS IN 12  nge
office or nagent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State o m familiar with, and accept the obligation of the state	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELETE   DELETE   DELETE   DELETE   DELETE	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D MAC 6515 W D	Temstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN B  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA 35 BLVO CH, FLA	ND DIRE Char  3413 Char  334  Char  334  Char  334	CTORS IN 12  nge
office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State o m familiar with, and accept the obligation of the state	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELET	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D WEST V S PAUL 6515	Temstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN B  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA 35 BLVO CH, FLA	334 GChar 334 GChar 334 GChar 334 GChar	CTORS IN 12  nge
office or nagent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	egistered agent, or both, in the State o im familiar with, and accept the obligation of the state of the stat	Florida. Such change was a cons of, Section 607.0505, Florida in title if applicable. (NOTE)   DELETE   DELET	Registered /   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	P MARC 6515 WEST V D WEST V S PAUL 6515	Temstating)  ADDITIONS/CHANGES TO  A KARON  S SOUTHERN B  T PALM BEACH  M KARON  SOUTHERN B  T PALM BEACH  MC CONNELL  T PALM BEACH	DATE OFFICERS AN  OLVO FLA 35 BLVO CH, FLA	334 GChar 334 GChar 334 GChar 334 GChar	CTORS IN 12  nge

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 100 iver 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 or an appear of the 100 iver or trustee empowered.

SIGNATURE:

URE REQUIRED

561-634-3332