


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

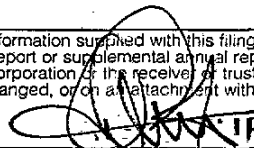
FILED

Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K97571 (9) 1. Corporation Name J.K. ASSOCIATES, INC.					
Principal Place of Business. 120 E OAKLAND PARK BLVD STE 105 FT LAUDERDALE FL 33304 408			Mailing Address PO BOX 585 DEERFIELD BCHG FL 33443 US SUITE 300 EAST BOCA RATON, FL 33431		
2. Principal Place of Business 21 1900 CORPORATE BLVD NW Suite, Apt. #, etc. 22 SUITE 300 EAST City & State 23 BOCA RATON, Zip 24 FL 33431		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 PALM BCH Country 30		3. Date Incorporated or Qualified 06/23/1989 4. FEI Number 65-0132144 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent BOWMAN, DAVID S. ONE EAST BROWARD BLVD SUITE 1200 FT LAUDERDALE 33301					
10. Name and Address of New Registered Agent 81 Name 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) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE NAME STREET ADDRESS CITY-ST-ZIP DP KUAR, JUDY 120 E OAKLAND PARK BLVD, STE 105 FT LAUDERDALE FL			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP JUDY KUAR 1900 CORPORATE BLVD N.W. BOCA RATON, FL 33431		
TITLE NAME STREET ADDRESS CITY-ST-ZIP D FELSTEAD, PHILIP 120 E OAKLAND PK BLVD SUITE 405 FT LAUDERDALE FL			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP PHILIP FELSTEAD 1900 CORPORATE BLVD NW. BOCA RATON, FL 33431		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

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 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:

 PHILIP FELSTEAD
DIRECTOR

1/6/97

561290180

CR2E034 (10/97)