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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

FILED Feb 04 1998 8:00am Secretary of State

Principal Plac	EKI ENTERPRISES, INC.	Mailing Address			
C/O JOHN TURECKI 2357 HOLLY LANE 2357 HOLLY LANE 2357 HOLLY LANE PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL			FL 33410	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 04/13/1988	-
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0047420	Not Applicable
Suite, Apt.	#, 6 [C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6, Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Country	8. This corporation owes or has paid the d	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes 🗌 No
	g, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registere	d Agent
	RECKI, JOHN		81 Name		
733 WATERWAY DR				ress (P.O. Box Number is Not Acceptable)	
NO	PALM BCH FL 33408		83	 	
			03		
			84 City	F	85 Zip Code
44 Diverget	to the provisions of Sections 607.0	602 and 607 1609 Florida Ctatuta	the above named corr	•	- ' '
office or n agent. I a SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a igations of, Section 607.0505, Flor	uthorized by the corpora rida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
Oldifficial	Signature, typod or printed name of registered a	agest and to if applicable (NOTE	Registered Agent s-gnature requi	red when reinstating) DATE	The second secon
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTS	☐ DELETE	1.1 YOLE		Change Addition
NAME	TURECKI, JOHN		1.2 NAME		
STREET ADORESS	2357 HOLLY LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS,	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE		CT DECEIG	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME		English Course	3.2 NAME		onange riduituti
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	41 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		• • —
STREET ADDRESS			4 3 STREET ADDRESS		
CiTY-ST-ZIP			4.4 CiTY+ST-ZiP		
TITLE		DELETE	5.1 TiTLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	_		5.4 CITY - ST - ZIP	•	
TITLE	7	DELETÉ	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
44 I borobu o	artify that the information complical	with the filler door on audituria.	the everenties stated in	Section 110 07/9Vi) Floride Statutes Lifether	partify that the information

indicated on this annual report or supplied with an intermation received in section 119.07(3)(f), Florida Statutes. Floring receiving 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 arm 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.