2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 JUL 32 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

011979 AV

DOCUMENT # P00000013740

1. Entity Name

JLK FOOD SERVICES INC.

Principal Place of Business	Mailing Address
3076 SE DOMINICA TERRACE STUART FL 34997	3076 SE DOMINICA TERRACE STUART FL 34997

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2405303 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KELSON, JAMES L 3076 SE DOMINICA TERRACE STUART FL 34997	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
After September 10, 2003 Fee will be $750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KELSON, JAMES L 3076 SE DOMINICA TERRACE STUART FL 34997	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition ~~07/31/03--01023--002 **150.00~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SMITH, RONALD 3076 SE DOMINICA TERRACE STUART FL 34997	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 100021956411 07/31/03--01023--002 **150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD KELSON, ELIZABETH 3076 SE DOMINICA TERRACE STUART FL 34997	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (4/03)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 7-22-03 772-220-3151

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JP 8/1/03

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DID NOT RECEIVE ORIGINAL FORMS

DOCUMENT # P00000013710

1. Entity Name
JLK FOOD SERVICES INC

DO NOT WRITE IN THIS SPACE

55051744
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3076 SE DOMINICA TERRACE	3076 SE DOMINICA TERRACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: STUART FL	City & State: STUART FL
Zip: 34997 Country: USA	Zip: 34997 Country: USA

4. FEI Number: 59-2405303 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: JAMES L. KELSON

Street Address (P.O. Box Number is Not Acceptable): 3076 SE DOMINICA TERRACE

City: STUART FL Zip Code: 34997

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Annual UBR is $612.50
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES	TITLE	
NAME	JAMES L. KELSON	NAME	
STREET ADDRESS	3076 SE DOMINICA TERRACE	STREET ADDRESS	
CITY-ST-ZIP	STUART FL 34997	CITY-ST-ZIP	
TITLE	VPRES	TITLE	
NAME	RONALD SMITH	NAME	
STREET ADDRESS	3076 SE DOMINICA TERRACE	STREET ADDRESS	
CITY-ST-ZIP	STUART FL 34997	CITY-ST-ZIP	
TITLE	SEC-TREAS	TITLE	
NAME	ELIZABETH KELSON	NAME	
STREET ADDRESS	3076 SE DOMINICA TERRACE	STREET ADDRESS	DO NOT WRITE
CITY-ST-ZIP	STUART FL 34997	CITY-ST-ZIP	
TITLE		TITLE	IN THIS SPACE
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

js 8/1/03

Attachment
85051744
P0000013740

7-7-03

WE DID NOT RECEIVE ORIGINAL FORM - SO WE DOWNLOADED A FACSIMILE + MAILED AND PAID PREVIOUSLY.