# 2007 FOR PROFÍT CORPORATION

### **ANNUAL REPORT**

**DOCUMENT # P00000037444** 

1. Entity Name

J & K ADVERTISING OF DESTIN, INC.



Principal Place of Business

Mailing Address

34876 EMERALD COAST PKWY. DESTIN, FL 32541

1217 AIRPORT ROAD DESTIN, FL 32541

## **FILED** Jul 17, 2007 08:00 AN Secretary of State



#### DO NOT WRITE IN THIS SPACE

07022007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 59-3647265 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PAYNE, ALAN S 1217 AIRPORT ROAD **SUITE 419** DESTIN, FL 32541

SIGNATURE:

### DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		Election Campaign Financ     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILLIPS ROE, BOBBIE ANN 34876 EMERALD COAST PKWY. DESTIN, FL 32541	,	i		U00000769251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROE, STEVE 34876 EMERALD COAST PKWY DESTIN, FL 32541				07/17/07-80005-003 550.00
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	VP PHILLIPS, SANDRA 34876 EMERALD COAST PKWY DESTIN, FL 32541			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 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 accuracy, with all ottop like empowered.					

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR