

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 27, 2006 8:00 am**  
**Secretary of State**

02-27-2006 90071 046 \*\*\*150.00

**DOCUMENT # P00000037776**

1. Entity Name

HI JAK 2, INC.



Principal Place of Business

7516 W. IRLO BRONSON HWY.  
KISSIMMEE FL 34747

Mailing Address

7516 W. IRLO BRONSON HWY.  
KISSIMMEE FL 34747



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-3638948

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**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:

TITLE	V	<input type="checkbox"/> Delete
NAME	ZLATKISS, LINDA	
STREET ADDRESS	7516 W. IRLO BRONSON HWY.	
CITY-ST-ZIP	KISSIMMEE FL 34747	
TITLE	P	<input type="checkbox"/> Delete
NAME	ZLATKISS, JERROD	
STREET ADDRESS	7516 W. IRLO BRONSON HWY.	
CITY-ST-ZIP	KISSIMMEE FL 34747	
TITLE	S	<input type="checkbox"/> Delete <input checked="" type="checkbox"/>
NAME	ZLATKISS, STEVEN	
STREET ADDRESS	7516 W. IRLO BRONSON HWY.	
CITY-ST-ZIP	KISSIMMEE FL 34747	
TITLE	T	<input type="checkbox"/> Delete
NAME	GEORGI, JOSEPH	
STREET ADDRESS	7516 W. IRLO BRONSON HWY.	
CITY-ST-ZIP	KISSIMMEE FL 34747	
TITLE	V	<input type="checkbox"/> Delete
NAME	GEORGI, BASSAM	
STREET ADDRESS	7516 W. IRLO BRONSON HWY.	
CITY-ST-ZIP	KISSIMMEE FL 34747	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/13/06