FILED May 24, 2002 8:00 am Secretary of State

FOR PROFIT CORPORATION

CINIFORIN BUSINESS REPORT (UBR)			05-24-2002 91347 011 ***150.00	
DOCUMENT # 1. Entity Name	01000092704			
J+K Ve	ending, Inc.			
DO NOT WRITE IN THIS SPACE			669340	
2. Principal Place of Business	3. Mailing Address			
7920 CAMERON CA Suite, Apt. #, etc.	94 CT. 7930 (AMERO Suite, Apt. #. etc.	u ly Cover	DO NOT WRITE IN THIS SE	PACE
NOWPORT RICHEY,		er Fc.	4. FEI Number 59-375 3045	Applied For
7 Country 34.653.	Zip 5A -34653	Country VSA	5. Certificate of Status Desirert	Not Applicable 8.75 Additional
			7. Name and Address of Current Registered A	ee Required
rodi	OT WRITE ##	Name Joh	n M. Rowles	
IN THIS SPACE Street Address (P.O. Box Number is Not Acceptable) 7920 CAMERON CAY COURT				
		City NEW A	PURT RICHEY FL	Zip Code 34653
8. The above named entity submits to	his statement for the purpose of changing its	registered office or register	ed agent, or both, in the State of Florida.	139653
SIGNATURE _ M	Focule Joth	M, ROUCE, Registered Agent signature required	PRELIMENT	
This corporation is eligible to satis Tax filing requirement and elects ((See criteria on back)	to do so. After laby After laby After laby After laby After laby	ay (i Feelis \$15000); \$1 FFeelis \$55000; \$1 IUBR (\$\$6125) Dio Departmento \$12	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
TITLE PRESIDENT /	OFFICERS AND DIRECTORS		desidestaralisationerigeschickarea	herceroxers
NAME JOHN M ROWU	εί	TITLE SEE SEE SEE		201)
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TITLE YICE PRESIDE	217/36.	CONSTRUCTION OF THE STATE OF TH		B Company
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TITLE NAME				
STREET ADDRESS CITY-ST-ZIP	•	NAME SOME STREET ADDRESS 102 200 000		
13. Thereby certify that the information	Supplied with this filling does not qualify for-	city-st/pe-st/		
13. 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 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 11 or on an				
SIGNATURE: Supplied the State of Printing Operation of State of St				