

FILED
Aug 04, 2002 8:00 am
Secretary of State

07-17-2002 90134 026 ***550.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P01000096242**

1. Entity Name
SK JANITOR, INC.

Principal Place of Business
2057 ST MARTINE DRIVE EAST
JACKSONVILLE FL 32246

Mailing Address
2057 ST MARTINE DRIVE EAST
JACKSONVILLE FL 32246

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3761243

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KWAK, JIN HEE
2057 ST MARTINE DRIVE EAST
JACKSONVILLE FL 32246

7. Name and Address of New Registered Agent

Name **Chang, Jung Sook**
 Street Address (P.O. Box Number is Not Acceptable)
2057 St. Martins Dr. E
 City **Jacksonville** FL Zip Code **32246**

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 **CHANG, JUNG SOOK**

Chang Jung

JULY 3, 2002

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$650.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D**
 NAME **KWAK, JIN HEE** ☒ Delete
 STREET ADDRESS **2057 ST MARTINE DRIVE EAST**
 CITY-ST-ZIP **JACKSONVILLE FL 32246**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
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 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Change ☒ Addition
 NAME **Chang, Jung Sook**
 STREET ADDRESS **2057 St. Martine's Dr. E**
 CITY-ST-ZIP **Jacksonville, FL 32246**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

SIGNATURE:

Chang Jung **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/02

Date

904-220-3254

Daytime Phone #

CR2E034 (4/02)