

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000082999

Entity Name: JMK PARTNERS, INC.

FILED  
Oct 28, 2004  
Secretary of State

## Current Principal Place of Business:

3615 CORAL TREE CIRCLE  
COCONUT CREEK, FL 33073

## New Principal Place of Business:

5185 PRAIRIE DUNES VILLAGE CIRCLE  
LAKE WORTH, FL 33463

## Current Mailing Address:

3615 CORAL TREE CIRCLE  
COCONUT CREEK, FL 33073

## New Mailing Address:

5185 PRAIRIE DUNES VILLAGE CIRCLE  
LAKE WORTH, FL 33463

FEI Number: 04-3768777

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HATTON, DAVID L  
150 ALHAMBRA CIRCLE  
SUITE 1150  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

SESHOLTZ, JASON L  
5185 PRAIRIE DUNES VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US

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.

SIGNATURE: JASON SESHOLTZ

10/28/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: SESHOLTZ, JASON  
Address: 3615 CORAL TREE CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP/D ( ) Delete  
Name: SESHOLTZ, KATHY  
Address: 3615 CORAL TREE CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: SESHOLTZ, JASON  
Address: 5185 PRAIRIE DUNES VILLAGE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: VP/D (X) Change ( ) Addition  
Name: SESHOLTZ, KATHY  
Address: 5185 PRAIRIE DUNES VILLAGE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON SESHOLTZ

P/D

10/28/2004

Electronic Signature of Signing Officer or Director

Date