## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000128919

Entity Name: JIK COLONNADES GP, INC.

FILED Mar 09, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 330165897 **Current Mailing Address: New Mailing Address:** 7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 330165897 FEI Number: 20-0399243 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: COMPTO, CHRISTY COMPLO, CHRISTY 7900 MIAMI LAKES DR WEST 7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016 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: CHRISTY COMPLO, VPS 03/09/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition KISLAK, JAY I Name: Name: 7900 MIAMI LAKES DR WEST Address: Address: City-St-Zip: MIAMI LAKES, FL 330165897 City-St-Zip: DPT Title: Title: () Delete () Change () Addition Name: BARTELMO, THOMAS Name: 7900 MIAMI LAKES DR WEST Address: Address: MIAMI LAKES, FL 330165897 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition BRAUN, STEPHEN Name: Name: 7900 MIAMI LAKES DRIVE WEST Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition LUBOW, CHERYL Name: Name: Address: 7900 MIAMI LAKES DRIVE WEST Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: **VPS** Title: ( ) Delete (X) Change ( ) Addition Name: COMPLO, CHRISTY Name: COMPLO, CHRISTY 7900 MIAMI LAKES DRIVE WEST Address: 7900 MIAMI LAKES DRIVE WEST Address: City-St-Zip: HIALEAH, FL 33016 City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHRISTY COMPLO VPS 03/09/2009