2007 FOR PROFIT CORPORATION

Jul 16, 2007 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # P92000010152 07-16-2007 90125 012 ***150.00 1. Entity Name JKS INDUSTRIES, INC. Principal Place of Business Mailing Address 40122600 2701 COZART RUAD 2701 COZART ROAD MULBERRY, FL 33860 US MULBERRY, Ft 33860 2. Principal Place of Business - No P.O. Box # Mailing Address 9046 Bruce B DownsB Suite, Apt. #, etc. 07092007 CR2E034 (12/06) Chg-P City & State 4. FEI Number Applied For 59-3152856 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHIN, KEN SHIN, KEN 19046 Bruce B. Downs Bly Street Address (P.O. Box Number is Not Acceptable) MULBERRY, FL 32860 PMB#114 Tampa FL 33647 City . 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 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees corporation did not receive the prior notice., Due by September 14, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. MR TITLE ☐ Delete TITLE ☐ Change ☐ Addition SHIN, KEN NAME NAME 19046 Bruce B Downs Bh 2701-COZART ROAD STREET ADDRESS STREET ADDRESS PMB#114 CITY-ST-ZIP 33647 CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

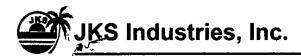
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED



ATTACHMENT 40125239

July 9, 2007

Department of State Division of Corporations PO BOX 6198 Tallahassee, FL 32314

Subject: Waiver of the late fee

Reference: DOCUMENT # P92000010152, JKS INDUSTRIES, INC.

To Whom It May Concern:

I am enclosing a check in the amount of \$150 to cover the normal annual filing fee along with the report. Please note that I made corrections to the mailing address for both the facility and the officer. Please consider our request to have the late fee waived in light of the circumstances as well as our past performance in paying in a timely manner.

If you need to reach me you may contact me at 813-972-0029.

Thank you for your time.

Jenny Shin