

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000032217 (0)**

1. Corporation Name

A & K ENTERPRISE OF JACKSONVILLE, INC.



Principal Place of Business

Mailing Address

30 BLANDING BLVD.
SUITE 10
ORANGE PARK FL 32073

30 BLANDING BLVD.
SUITE 10
ORANGE PARK FL 32073

3. Date Incorporated or Qualified
05/03/1993

3a. Date of Last Report
02/23/1995

21. Principal Place of Business
10 BLANDING BLVD

2a. Mailing Address
10 BLANDING BLVD

4. FEI Number
59-3178170

Applied For
 Not Applicable

22. Suite, Apt. #, etc.
SUITE A

Suite, Apt. #, etc.
SUITE A

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

23. City & State
ORANGE PARK FL

28. City & State
ORANGE PARK FL

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

24. Zip Country
32073

29. Zip Country
32073

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AKITAKA, YAMAMOTO
1973 HAZELNUT RUN WEST
ORANGE PARK FL 32073**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Akitaka Yamamoto*

AKITAKA YAMAMOTO

2/29/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	YAMAMOTO, KEIKO	
STREET ADDRESS	1973 HAZELNUT RUN WEST	
CITY - ST - ZIP	ORANGE PARK FL	
TITLE	VTSD	<input type="checkbox"/> DELETE
NAME	YAMAMOTO, AKITAKA	
STREET ADDRESS	1973 HAZELNUT RUN WEST	
CITY - ST - ZIP	ORANGE PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Akitaka Yamamoto*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96 **904-272-5447**

Date

Daytime Phone #

CR2E034 (12/95)