## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300036681

JDK INVESTMENTS, INC.

- Batter auf alle ber traber um Bulle.

Principal Place of Business Mailing Address 1007 W. UNIVERSITY AVE 607 SW 27TH ST **GAINESVILLE FL 32601 GAINESVILLE FL 32607** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3394 W. Univerty Ave #367 330 , Suite, Apt. #, etc. 59-3185206 21 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be FL GAINESUILL 23 28 Trust Fund Contribution Added to Fees 32607 Zip Country Country 8. This corporation owes or has paid the current year Intangible USA 24 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KESSELMAN, JOSHUA 414 NE 4TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32601** 83 City 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** Signature, typed or printed name of regulared agent and lide if applicable (NOTE: Flegistered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 T(TLE Change Addition KESSELMAN, JOSHUA D NAME 1.2 NAME 607 N.E. 6TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL 32601** 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 10ftE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 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

4/13/08

**FILED** 

Apr 29 1998 8:00am

Secretary of State