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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400030232 (0)

J.S.K. DEVELOPMENT, INC.

FILED
Jan 29 1998 8:00am
Secretary of State

SOM DEVELOT MENT, 190					
Principal Place of Business	Mailing Address				
5970 SW 18TH ST	5970 S W 18TH ST				
STE 320 STE 320					
BOCA RATON FL 33433 BOCA RTON FL 33433			DO NOT WRITE IN TH	IIS SPACE	
us	U\$			3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address			04/18/1994 4. FEI Number	1 1
21	26 26				Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.		•		65-0501211	Not Applicable \$8.75 Additional
27			5. Certificate of Status Desired	Fee Required	
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 28				Trust Fund Contribution	Added to Fees
Zip Country	Zip Country		8. This corporation owes or has paid the		
24 25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Curren	Registered Agent			10. Name and Address of New Registere	ed Agent
KRICH, JEFF		81	Name		
7000 HIGH RIDGE ROAD		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
LANTANA FL 33462				,	
		83	:		
		84	City		. 85 Zip Code
			' '	F	' L '
11. Pursuant to the provisions of Sections 607,0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	l and 607.1508, Florida Statu of Florida, Such change was	utes, the above	e-named corp	poration submits this statement for the purpose tion's heard of directors. I hereby accept the	of changing its registered
agent. I am familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Statute	s.	ion o board of directors. Thereby accept the e	appointment as registered
SIGNATURE					
Signature, typed or printed name of registered ager 12. OFFICERS AND	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TE: Registered Ac	ent signature requir	red when reinstating) DATE	
TITLE D	DELETE	1.1 TITLE	- I	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME KRICH, JEFFREY S		1.2 NAME	1		C Change
STREET ADDRESS 5970 S W 18TH ST STE 320			T ADDRESS		
CITY-ST-ZIP BOCA RATON FL		1.4 CITY-			
TITLE	☐ DELETE	2.1 TITLE	21-211		Change Addition
NAME		2.2 NAME			_ ,
STREET ADDRESS		2.3 STREE	T ADDRESS		
CITY-ST-ZIP		2, 4 CITY-	i		
TITLE	DELETE	3.1 TITLE	<u> </u>		Change Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREE	ADEIRESS		
CITY-ST-ZIP		3.4. CMY-	ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME		4, 2 NAME			
STREET AODRESS		4.3 STREET	ADCRESS		İ
CITY-ST-ZIP		4.4 CITY~5	IT-ZIP		
TITLE	DELETE	5.1 TITLE			Change Addition
NAME		5.2 NAME			
STREET ADDRESS			1		
CITY-ST-ZIP		5.3 STREET	ADERESS		I
TITLE		5.3 STREET 5.4 CITY - S	1		
l t	☐ DELETE		1		☐ Change ☐ Addition
NAME	☐ DELETE	5.4 CITY - 5	1		Change Addition
NAME STREET ADDRESS	☐ DELETE	5.4 CITY - S 6.1 TITLE	T-ZIP		Change Addition

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 report is report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an inflamment with an address.

SIGNATURE:

1-21-98

561-534-0494