

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

FILED  
Apr 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000039402 (0)

1. Corporation Name  
JR KAULEN, INC.

Principal Place of Business

C/O 999 BRICKELL AVE  
SUITE 1006  
MIAMI FL 33131  
US

Mailing Address

C/O 999 BRICKELL AVE  
SUITE 1006  
MIAMI FL 33131  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1994

4. FEI Number

65-0509896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 7523 KINGSLEY COURT

Suite, Apt. #, etc.

22

City & State

23 LAKE WORTH, FL

Zip

24 33467

Country

25

2a. Mailing Address

26 7523 KINGSLEY COURT

Suite, Apt. #, etc.

27

City & State

28 LAKE WORTH, FL

Zip

29 33467

Country

30

9. Name and Address of Current Registered Agent

BAIER, KIRSTEN I  
999 BRICKELL AVE  
SUITE 1006  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

JAN KAULEN

82 Street Address (P.O. Box Number is Not Acceptable)

7523 KINGSLEY COURT

83

84 City

LAKE WORTH

FL

85

Zip Code  
33467

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, 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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-17-1998

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
KAULEN, JAN  
C/O 999 BRICKELL AVE SUITE 1006  
MIAMI FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
KAULEN, RENATE  
C/O 999 BRICKELL AVE SUITE 1006  
MIAMI FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
D  
KAULEN, JAN  
7523 Kingsley Court  
Lake Worth, FL 33467

☒ Change

☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
D  
KAULEN, RENATE  
7523 Kingsley Court  
LAKE WORTH, FL 33467

☒ Change

☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I hereby 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.

SIGNATURE

J. Kaulen

3-30-98

CR2E034 (10/97)